

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, NM 87504-2088

Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Chevron U.S.A. Inc. P.O. Box 1150 Midland, TX 79702		² OGRID Number 4323
		³ Reason for Filing Code AG EFFECTIVE 9/26/96
⁴ API Number 30-025-04516	⁵ Pool Name EUNICE MONUMENT G-SA	⁶ Pool Code 23000
⁷ Property Code 2616	⁸ Property Name EUNICE MONUMENT SOUTH UNIT	⁹ Well Number 186

II. ¹⁰ Surface Location

UL or lot no. C	Section 5	Township 21S	Range 36E	Lot. Idn	Feet from the 653	North/South Line NORTH	Feet from the 1980	East/West line WEST	County LEA
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
S	P								
¹² Lse Code S	¹³ Producing Method Code P	¹⁴ Gas Connection Date 1992	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
022345	TEXACO E&P P. O. BOX 4325 HOUSTON, TX 77210	2815413	G	P-06-21S-36E
009171	GPM CORP. 4001 PENBROOK ODESSA, TX 79762	2815414	G	P-06-21S-36E
024650	WARREN PETROLEUM P. O. BOX 1589 TULSA, OK 74102	2817996	G	P-06-21S-36E

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBSD	²⁹ Perforations
³⁰ Hole Sie	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method
⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: J. K. Ripley			OIL CONSERVATION DIVISION		
Printed name: J. K. RIPLEY			Approved by:		
Title: TECHNICAL ASSISTANT			Title:		
Date: 10/1/96			Approval Date: OCT 10 1996		
Phone: (915)687-7148					

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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