

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator

Chevron U. S. A. Inc.

Address

P. O. 670, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter of: ☒ Oil ☐ Dry Gas ☐ Condensate

☐ Recompletion ☒ Casinghead Gas ☐ Other (Please explain)

☐ Change in Ownership

Split Connection on both oil & gas

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Eunice Monument South Unit	276	Eunice Monument G-SA	State, Federal or Fee	Fee
Location				
Unit Letter	C	Feet From The	North	Line and
Line of Section	10	Township	21S	Range
			36E	NMPM
				Lea
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
ARCO, Shell, & Texas New Mexico Pipeline	
Name of Authorized Transporter of Gas ☒	Address (Give address to which approved copy of this form is to be sent)
GPM Gas Corporation	
Warren Petroleum & Phillips 66 Natl Gas	EFFECTIVE February 1, 1992
If well produces oil or liquids, give location of tanks.	Unit : 11 Sec. : 4 Twp. : 21S Rge. : 36E
Is gas actually connected?	yes
When	unknown

If this production is commingled with that from any other lease or pool, give commingling order number

NOTE: Complete Parts IV and V on reverse side if necessary.

IV. CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

[Signature]

(Signature)

New Mexico Area Superintendent

(Title)

1-23-87

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 29 1987

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1704.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 181.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change.

Separate Forms C-104 must be filed for each pool in newly completed wells.

V. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.S.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Test Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Total Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Total Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, bore pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

RECEIVED
JAN 28 1987
FCD
W. C. B. S. S. S.