District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico iergy, Minerals & Natural Resources Department Form C-104 Revised February 10, 1994

District RC

PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

Instruction on back Submit to Appropriate District Office

District III 1000 Rio Braz	zos Rd .	Aztec N	JRA 8741	0	•		Box 208						5 Copie	
District IV					San	ita Fe,	NM 875	04-208	38		г	7 AMENI	DED REPOR	
PO Box 2088,	, Santa F				.									
1.			1 Ope	SI FO	R ALLO	DWAI	BLE AND	O AUT	HORIZ	ATION TO				
			evron (J. S. A.,		41000					² OG	RID Numbe		
P. O. Box 1150 Midland, TX 79702										3 Reason fo	r Filing (Code New	ode New Gas POD's	
⁴ API 30 - 025 -				Funi	⁵ Pool N ce Monu n		64	V	Pool Code					
⁷ Propi				Lain	8 Property				23000 Vell Number					
	616 irface	l oca	tion		<u>_</u>	unice	Monumen	t South	n Unit				308	
Ul or Lot. No. Section			Township	Range	Lot	ldn.	Feet from th	ne Nor	th/South Li	e Feet from the East		West Line County		
G	1		215	36E			1980		North	1980		East	Lea	
11 Bottom Hole Ul or Lot. No. Section T			ocatio	Range	Lot Idr) F	eet from the	North/	South Line	Feet from the East		West Line County		
	or comment				Lociu	` '`	cet from the	North	South Line	reet nom the	Easuv	rest Line	County	
12 Lse Code			thod Code	code 14 Gas Connection Date			¹⁵ C-129 F	¹⁵ C-129 Permit Number ¹⁶ (<u>I</u> Date	¹⁷ C-129 Expiration Date		
III. Oil and	d Gas	Trans	sporte	<u> </u>										
	¹⁸ Transporter			19 Transporter Name and Address					²¹ O/G	²² POD ULSTR Locatio				
02465	0	Warr	en Petr	en Petroleum 28'					G	and Description				
				9, Tulsa,	OK 74	102		<u> </u>	3		1-11	-21S-36I	<u> </u>	
00917	71		Corp.				281	5420	G					
			-	Penbrook, Odessa, TX 79762						17-1	<u> </u>			
IV. Produc	ced W	ater			<u> </u>									
²³ P(OD						²⁴ POD UL	STR Loc	ation and I	Description				
V. Well C		tion												
²⁶ Sp 	ud Date			⁶ Ready D	Pate 27 T)		²⁸ PBTD		²⁹ Perforations		
3	^{l0} Hole Si	ze		³¹ C	asing & T	ubing Si	ize		³² Depti	Set		³³ Sacks Cement		
														
								<u>_</u>	<u> </u>				<u> </u>	
									 	· · · · · · · · · · · · · · · · · · ·				
VI Mall T	oet Da	110									<u></u>		 -	
	VI. Well Test Data 34 Date New Oil			⁶ Gas Delivery 36 7			ate	³⁷ Te	st Length	³⁸ Tbg. Pressu		re 39	Csg. Pressure	
⁴⁰ Choke	⁴⁰ Choke Size		41 O		⁴² Water			4:	³ Gas	44	AOF	4	⁶ Test Method	
46 L hereby co				of the Oil Conservation Division ha										
complied with	and that	the inf	ormation	given abo	ve is true	and co	omplete to			CONSERVA	TION		ON TON	
Signature:	\mathcal{K}	Pio	1011-					Approv		* 12. ** * 12. ** * 13. **		i luok	1014	
Printed Name J. K. Ripley					Title:									
Title:							Approved Date: /113 0 9 1095							
Date: 7/2	ſ	hone: (915)	687-71	 48										
⁴⁷ If this is a		of opera	ator fill in				ne of the pr	evious or	perator			· · · · · · · · · · · · · · · · · · ·		
Previ	ous Oper	ator Sig	nature				Printed Nam	ıe		Title			Date	

State of New Mexico

Submit 5 Copies
Appropriate District Office
DISTRICT I
P. O. Box 1980, Hobbs, NM 88240

Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P. O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.														
Operator Chevron U.S.A., Inc.										Well API No. 30 - 025-04618				
Address P. O. Box 1150, Midland, TX 79	 9702									·				
Reason (s) for Filling (check proper box)					· · · · · · · · · · · · · · · · · · ·		Othe	es (Plecise ex	plain)					
New Well Change in Transporter of: Recompletion Oil X Dry Gas														
Change in Operator	sate													
If chance of operator give name and address of previous operator										-				
II. DESCRIPTION OF WELL	AND LEASI	E												
Lease Name	Name, I	ncluding l	ormatio	n			d of Lease e, Federal or Fee	Lease	No.					
Eunice Monument South Unit Location	308		Eunic	e Monu	ment			Stat	<u> </u>					
Unit Letter G	: <u></u> _	1980	Feet I	From The	Nor	th	_Line	and	1980	Feet From The	<u>East</u> L	.ine		
Section 11 Township	218		Range		36E		, NM	ГРМ,	Lea	1	Count	у		
III. DESIGNATION OF TRAN	SPORTER (NATU	RAL G	AS								
Name of Authorized Transporter of Oil	X	or Cond	iensate		Ad	dress	(Give	e address to	which appro	ved copy of this fo	orm is to be ser	rt)		
EOTT Oil Pipeline Co., ARCO,	Texas New									TX 77210-46				
Name of Authorized Transporter of Casingle OTT Energy Pineling 1		or	D y Gas	L	۵۱ م	dress	(Give	e address to	which appro	ved copy of this fo	orm is to be ser	it)		
If well produces oil or liquids, give local GCILAG. 4-1-94	Unit	Twp.	Rge.	ls gas actually connected?			When?							
If this production is commingled with that fi	rom any other la	200 05 70	al aiva	<u> </u>	line anden	Yes				Unknown				
IV. COMPLETION DATA	tom any other lea	ase of po	oi, give t	omming.	iing order	number:								
Designate Tune of Completion	(V)	Oil We	ll Ga	s Well	New We	ll Wor	kover	Deepen	Plugback	Same Res'v	Diff Res'v			
Designate Type of Completion Date Spudded		Total Depth			P. B. T. D.		L							
Elevations (DF, RKB, RT, GR, etc.)	Name of Produ	cing For	mation	•	Top Oil/Gas Pay				Tubing Depth					
Peforations		<u> </u>				Depth Casin; g								
	Tī	IRING.	CASING	AND C	EMENTI	NG REC	CORD		<u> </u>	·				
HOLE SIZE	CASING			DEPTI			SACKS CEMENT							
		:												
				-										
V. TEST DATA AND REQUES	T FOR ALL	OWAE	BLE		L						·····			
OIL WELL (Test must be after re	ecovery of total v			and must				allowable j	for this depth	or be for full 24 i	hours)			
Date First New Oil Run To Tank	Date of Test				Producin	g Method	d	(Flow pum	p, gas lift, etc	c.)				
Length of Test	Tubing Pressure	Casing Pressure				Choke Size								
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.				Gas - MCF								
GAS WELL	Length of Test								T					
Actual Prod. Test - MCF/D		Bbls. Condensate/MMCF				Gravity of Condensate								
Testing Method (pilot, back press.)	Tubing Pressure	essure (Shut - in)				Casing Pressure (Shut - in)				Choke Size				
I hereby certify that the rules and regulation							OIL	- cont	ERVAT	IĐM DIVIS	ION			
is true and complete to the best of my kno	Date Approved													
DI Figure					Ву	^	BICIF	IAL SIGN	ED BY JEI	RY SEXTON				
Signature		DISTRICT I SUPERVISOR												
J. K. Ripley Printed Name	T.A.	Titio	e		·									
12/8/93		687-714	18											
Date	Tele	phone N	O.	ŀ								į		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C 104 must be filed for each pool in multiply completed wells.

Submit 5 Copies Appropriate District Office

DISTRICT I

DISTRICT II

P. O. Box 1980, Hobbs, NM 88240

P. O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

SACKS CEMENT

REQUEST FOR ALLOWABLE AND AUTHORIZATION DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator Chevron U.S.A., Inc. 30 - 025-04618 Address P. O. Box 1150, Midland, TX 79702 Reason (s) for Filling (check proper box) Other (Please explain) New Well Change in Transporter of: Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Operator If chance of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee 808 **Eunice Monument South Unit Eunice Monument** 1980 Line and 1980 Feet From The North Feet From The East Line Unit Letter Township 218 Rangi 36E NMPM. Lea Section 11 County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Address X EOTT Oil Pipeline Co. , ARCO, Texas New Mexico Pipeline P.O. Box 4666, Houston, TX 77210-4666, Suite 2604 Name of Authorized Transporter of Casinghead Gas or D y Gas Address (Give address to which approved copy of this form is to be sent) Is gas actually connected? When? Twp. Rge. If well produces oil or liquids, Unit Sec. give location of tanks. Unknown If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plugback Same Res'v Diff Res'v Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth Name of Producing Formation Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Peforations Depth Casin g

V. TEST DATA AND REQUEST FOR ALLOWABLE

HOLE SIZE

(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) OIL WELL Date First New Oil Run To Tank Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Tubing Pressure Casing Pressure Choke Size Oil - Bbls. Water - Bbls. Gas - MCF Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate

TUBING, CASING AND CEMENTING RECORD

DEPTH SET

Casing Pressure (Shut - in)

Date Approved

By

Choke Size

ORIGINAL SIGNED BY JERRY SEXTON

THE RECT I SUPERVISOR

OIL CONSERVATION DIVISION

CASING & TUBING SIZE

Tubing Pressure (Shut - in)

Title

(915)687-7148

I hereby certify that the rules and regulations of the Oil Conservation

(pilot, back press.)

Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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blank

Testing Method

Signature J. K. Ripley Printed Name

12/8/93