

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 10-31-78
Format 06-31-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Chevron U. S. A. Inc.
Address
P. O. 670, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☒ Oil
☒ Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 Split Connection on both oil & gas

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name
Eunice Monument South Unit
Well No.
391
Pool Name, including Formation
Eunice Monument G-SA
Kind of Lease
State, Federal or Fee
Fee
Lease No.
Unit Letter
G
1980 Feet From The
North
1980 Feet From The
East
Line of Section
14
Township
21S
Range
36E
NMPM
Lea
County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

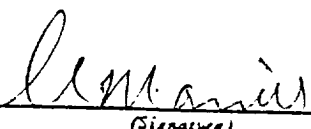
Name of Authorized Transporter of Oil ☒ or Condensate ☐
RCO. Shell, & Texas New Mexico Pipeline
Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Gas ☒
GPM Gas Corporation
Address (Give address to which approved copy of this form is to be sent)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

his 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.

CERTIFICATE OF COMPLIANCE

we 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 our knowledge and belief.


(Signature)
New Mexico Area Superintendent

(Title)
1-27-87
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 30 1987, 19

BY

ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.

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 111.

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 of conditions.

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
Is Spudded	Date Compl. Ready to Prod.		Total Depth		P.S.T.D.			
Wellbore (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Iterations					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.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
at Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Well	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
at Prod. Test-MCF/D	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Producing Method (puls, back pr.)			

RECEIVED
JAN 29 1987
OCD
HOBBS OFFICE