| Submit 5 Capies  |   |   |          | _          |  | ž  |                      |  | <b></b>                                      |            |  |
|--|---|---|----------|------------|--|--|----------------------|--|--|------------|--|
| Appropriate District Office<br>DISTRICT  <br>P.O. Box 1980, Hobbs, NM 88240  |   | State of N<br>Energy, Minerals and Nat  |          |            |  | io<br>urces Departi  | ment                 | Form C-104<br>Revised 1-1-89                 |  |            |  |
| DISTRICT II<br>P.O. Drawer DD, Astesia, NM \$8210  |   | OIL CONSERVATION DIVIS<br>P.O. Box 2088 |          |            |  |  |                      | See Instructions<br>at Bottom of Page        |  |            |  |
| DISTRICT III<br>1000 Rio Brazos Rd., Aziec, NM 87410   |   | Sa                                      | inta Fe  | , New M    | Aexico 87                              | 504-2088   |                      |  |  |            |  |
| I.   | REQ   | UEST F                                  |          | LLOWA      | BLE AND                                | AUTHOR   |                      |  |  |            |  |
| Operator<br>Charmon II a to a  |   | 10 IH/                                  | ANSP     | ORT OI     | L AND N                                | ATURAL G   | AS                   | API No.                                      |  |            |  |
| Chevron U.S.A. In<br>Address   |   |   |          |            |  |  |                      | 025-04815                                    |  |            |  |
| P.O. Box 1150, Mi<br>Reason(s) for Filing (Check proper box)   | dland,  | TX 797                                  | 702      |            |  |  |                      |  |  |            |  |
| New Well   |   | Change in                               | Transor  |            | 0                                      | ther (Please exp   | lain)                |  |  |            |  |
| Recompletion X<br>Change in Operator   | <b>Cil</b>  |   | Dry Ga   | <b>16</b>  |  |  |                      |  |  |            |  |
| If change of operator give name<br>and address of previous operator  | Casiogher   | d Gas                                   | Conder   | aste       |  |  |                      |  |  |            |  |
|  |   |   |          |            |  |  | <u> </u>             |  |  |            |  |
| Lease Name   | Well No.   Pool Name, Including Formation             |   |          |            |  |  |                      | Kind of Lesse                                |  |            |  |
| S.E. Felton  |   | 1                                       |          | nont_Y-    |  |  |                      | ANGENEN FO                                   | •  | 2358 No.   |  |
| Unit Letter P  | . :660  |   | Feet Fra | om The _ S | South In                               | 66 <u>0</u>  | · .                  |  | Fact   |            |  |
| Section 28 Townshi   | 21S   |   | Range    | 36E        |  | т  | —— <b>r</b> i<br>.ea | et From The .                                | Last   | Line       |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   |   |   |          |            |  |  |                      |  |  |            |  |
| Name of Authorized Transporter of Oil  | SPORTE  | or Condens                              | L AN     | D NATU     | RAL GAS                                | address to w   | hick approved        | ann af shin f                                |  |            |  |
| Name of Automin 4 Three and the sent (Circ and the sent of Which approved copy of this form is to be sent)                                       |   |   |          |            |  |  |                      |  |  |            |  |
| Northern Natural Gas   | -   |   |          |            |  | Address (Give address to which approved<br>2223 Dodge St. Omaha, |                      |  | copy of this form is to be sent)<br>NE 68102 |            |  |
| If well produces oil or liquids,<br>give location of tanks.  | Unit Sec. Twp. Rge.                                   |   |          |            | is gas actually connected? When<br>Yes |  |                      |  |  |            |  |
| If this production is commingled with that   | from any othe   | er lease or p                           | ool, giv | e comming  |  | ber:   |                      | 5/8  | /91  | <u> </u>   |  |
| IV. COMPLETION DATA  |   | Oil Well                                |          | ias Well   | New Well                               | Workover   |                      |  |  |            |  |
| Designate Type of Completion   |   | i                                       | i        | XX         | 1                                      | XX   | Deepen               | Plug Back<br>XX                              | Same Res'v                                   | Diff Res'v |  |
| 10/6/37 4/28/91  | Date Compi. Ready to Prod. workove<br>10/28/37 5/6/91 |   |          |            | 3885 '                                 |  |                      | <b>P.B.T.D.</b><br>3600'                     |  |            |  |
| Elevations (DF. RKB, RT, GR, etc.)<br>3610' GR   | Name of Producing Formation                           |   |          |            | Top Oil/Gas Pay                        |  |                      | Tubing Depth                                 |  |            |  |
| Perforations   | Yates-Seven Rivers                                    |   |          |            | 3193'                                  |  |                      | 3154 '<br>Depth Casing Shoe                  |  |            |  |
| <u>    3193'                               </u>  | TURING CASING AND                                     |   |          |            | CEMENTING RECORD                       |  |                      | 3658   | 3658'  |            |  |
| HOLE SIZE  | CASING & TUBING SIZE                                  |   |          |            | DEPTH SET                              |  |                      | s  | SACKS CEMENT                                 |            |  |
| <u>13 3/4"</u><br>7 5/8"   | 10 3/4" #32.75<br>7 5/8" #26.4                        |   |          | 299'       |  |  | 200sx Circ.          |  |  |            |  |
| 5 1/2"   | 5   | 5 1/2" #17                              |          |            | 1596'<br>3658'                         |  |                      | 350sx 90' Calc. TOC<br>150sx 1998' Calc. TOC |  |            |  |
| V. TEST DATA AND REQUES  |   | 3/8" T                                  |          |            | 3                                      | 154'   |                      |  |  |            |  |
| OIL WELL (Test must be after r   | ecovery of Iol  | al volume o                             |          |            |  |  |                      |  | or full 24 hou                               | rs.)       |  |
| Date First New Oil Run To Tank   | Date of Test  | Date of Test                            |          |            |  | Producing Method (Flow, pump, gas lift, etc                      |                      |  | c.)  |            |  |
| Length of Test   | Tubing Pres   | Tubing Pressure                         |          |            | Casing Pressure                        |  |                      | Choks Size                                   |  |            |  |
| Actual Prod. During Test   | Oil - Bbls.   | Oil - Bbls.                             |          |            | Water - Bbla.                          |  |                      | Gas- MCF                                     |  |            |  |
|  | <u> </u>  |   |          | <u></u>    |  |  |                      | I  |  |            |  |
| GAS WELL<br>Actual Frod. Test - MCF/D  | Length of T   | est                                     |          |            | Bbls. Conder                           | IN THE MARCE   |                      | Gravity of C                                 | ondensale                                    |            |  |
| 681  | 24hrs   |   |          | 0          |  |  | N.A.                 |  |  |            |  |
| Testing Method (pilot, back pr.)<br>Back Pressure  | Tubing Pressure (Shut-in)<br>240psi                   |   |          |            | Casing Pressure (Shut-in)              |  |                      | 27/64  |  |            |  |
| VI. OPERATOR CERTIFIC  | ATE OF  | COMPI                                   |          | CE         |  | DIL CON  |                      |  |  |            |  |
| i hereby certify that the rules and regulations of the Oil Conservation<br>Division have been complied with and that the information given above |   |   |          |            |  |  |                      |  |  |            |  |
| is use and complete to the best of my knowledge and belief.  |   |   |          |            | Date                                   | Approved   | <sup>۳</sup> t       |  | <u>, 1901</u>                                |            |  |
| Jall, Withen   |   |   |          |            | By_                                    |  | • • •                |  | 17: <b>1</b> 1                               |            |  |
| Signature D. M. Bohon Technical Assistant  |   |   |          |            | <sup>Dy</sup>                          |  |                      |  |  |            |  |
| Prioted Name         Title           5/13/91         (915)         687-7148  |   |   |          |            |  |  |                      |  |  |            |  |
| Date   |   |   | hone No  |            |  |  | <u></u>              |  |  |            |  |
|  |   |   |          | 1.1.7      | Dula 1104                              |  |                      |  |  |            |  |

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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.