

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

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Chevron U.S.A., Inc.	Well API No. 30 - 025-04990
Address P. O. Box 1150, Midland, TX 79702	
Reason (s) for Filling (check proper box) ☐ Other (Please explain)	
New Well ☐	Change in Transporter of:
Recompletion ☒	Oil ☐ Dry Gas ☐
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐
If chance of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name W. A. Ramsay (NCT-A)	Well No. 48	Pool Name, Including Formation Eumont Gas Yates 7R Queen	Kind of Lease State, Federal or Fee State	Lease No.
Location				
Unit Letter D : 0660 Feet From The North Line and 660 Feet From The West Line				
Section 34 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)					
Shell Pipeline	P. O. Box 1910, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Transwestern Pipeline Northern Natl. Gas	P. O. Box 1188, Houston, TX 77251-1188					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected ?	When ?
					Yes	04/20/93

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well X	New Well	Workover	Deepen	Plugback X	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod. 12/22/92		Total Depth 3972'		P. B. T. D. 3770 3874'			
Elevations (DF, RKB, RT, GR, etc.) 3580' GR	Name of Producing Formation Yates 7R Queen		Top Oil/Gas Pay 3145'		Tubing Depth 3047			
Peforations 3145'-3586'					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
No New Casing								

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

(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)

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

GAS WELL

Actual Prod. Test - MCF/D 500	Length of Test 24 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back press.) Flowing	Tubing Pressure (Shut - in) 90#	Casing Pressure (Shut - in) 0	Choke Size 2"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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.

J. K. Ripley
Signature
J. K. Ripley T.A.
Printed Name
4/21/93 Title
Date
(915)687-7148 Telephone No.

OIL CONSERVATION DIVISION

Date Approved **APR 26 1993**

By **Orig. Signed by**
Paul Kautz
Title **Geologist**

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.