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

PO Drawer DD, Artesia, NM 88211-0719 District III

1000 Rio Brazos Rd., Aztec, NM 87410 District IV

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

En.

State of New Mexico

, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

5 Copies

2040 South Pachec	o, Sauta Fe, l	NM 87505									∐ A	MEN	DED REPOR		
I.	<u> </u>	REQUES'	Γ FOR A	LLOWAE	BLE	AND A	JTHO	RIZAT	TION TO	TRA	NSPC	RT			
¹ Operator name and Address ² OGRID Number															
Chevron U.		:.									4323				
P.O. Box 1									³ Reason for Filing Code						
Midland, T		<u> </u>							EF	EFFECTIVE 7/1/98					
	API Number					⁵ Pool Na	me		⁶ Pool Code						
	0-025-29 perty Code	600		EUNICE	MONU	JMENT; GRA	/BURG-S	SAN ANDI	23000						
' Pro		8 Property N			9 Well Numb			Number							
10	2616			EUN	VICE	MONUMENT	SOUTH	UNIT	311			311			
		Location									<u>_</u> .				
UL or lot no.	Section	Township	Range	Lot. Idn	Feet	1			Feet from t	he E	East/West	line	County		
<u>I</u>	11 D 44	215	36E	<u> </u>		2080	460		EAST		LEA				
UL or lot no.	Section	Hole Loc		1					· · · · · ·	γ					
OL OI IOI IIO.	Section	Township	Range	Range Lot. Idn Feet from the Nortl				outh Line	Feet from t	he E	East/West	line	County		
12 Lse Code	¹³ Produci	ng Method Co	de 14 Gas C	Connection Date	1:	5 C-129 Perr	nit Numb	er lo	C-129 Effe	ective Da	te l'	7 C-129	Expiration Date		
Р		P		2/1/92	ļ			"	C 12) EIN	enve Da		C-123	Expiration Date		
III. Oil an	d Gas T	ransporte	ers												
18 Transporter			nsporter Nam			20 POD		21 O/G	2	² POD U	JLSTR Lo	cation			
OGRID	1000		d Address		_ _	-					Descripti				
001009	ľ) PIPELINE				071561	.0	0		P-06	5-215-3	6E			
). BOX 308 EPENDENCE,		R01											
037480		F ENERGY F				20065	1			· · · · · · · · · · · · · · · · · · ·					
037400	l l). BOX 466				2806541 0			P-06-21S-36E						
	HOUS	STON, TX	77210-4666												
024650		GY MIDSTF			2815419 G					L-11	-215-3	6E			
7.0) LOUISIAN STON, TX													
009171	- 1	CORP.				281542	0	G							
005171		PENBROOK	,			L-11-21S-36E									
		SSA, TX	79762	·									<u></u>		
IV. Produc		er			- 2/	1 000 111 00									
					2-	POD ULST	R Locatio	on and Desc	cription						
07156		Data				<u>.</u>									
V. Well Co	D	²⁸ PBTD			29 p.	erforation	<u>. </u>	30 DL	IC, DC, MC						
•		²⁶ Read						1.0	1	15	Di	ic, bc, wic			
³¹ Ho	le Size		32 Casing	& Tubing Size			33 De	pth Set			³⁴ Sacl	s Cem	ent		
															
171 117-11 m	oot Ded		·												
VI. Well To		6 Gas Deliver	v Date	37 Test Date		38 T	st Length		39 Tha Pr	9661159		40 Csa	Dracques		
24.0.1011		Gus Donver	ry Date 7 Test Date			1,	st Lengti	·	39 Tbg. Pressure			40 Csg. Pressure			
41 Choke Size		⁴² Oil	43 Water			44	Gas		⁴⁵ AOF	<u>-</u>		⁴⁶ Test Method			
Choke Size	Choke Size			3 water			Gas		TO AOI	•					
⁴⁷ I hereby certify	that the mile				TF										
complied with and	that the info	rmation given	above is true	and complete to	en		C	OIL CON	ISERVAT	ION D	IVISIO	N			
the best of my kno Signature:	wledge and	belief.	1			Approved by	GRK"				- tr - ₁₇₅ 51				
Printed name	(yell				Title:		 .	·	· · · · ·	-				
J. K. RIPLE	Υ	<i>V</i>				TRIE.									
Title: TECHNICAL A	SSISTANT	•				Approval Date:									
Date: 11/24/			Phone: (91)	$-\parallel$	 -		.								
48 If this is a cha		tor fill in the		5)687-7148	<u></u>								Yan I		
i uns is a cha	nge of opera	mi mi me (and name of t	ne pre	vious operato	PL								
	Previ	ous Operator S	Signature			Printe	l Name				Title		Date		
				·											

State of New Mexico ergy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

District RC PO Drawer DD, Artesia, NM 88211-0719

District III 1000 Rio Brazos Rd., Aztec, NM 87410 **OIL CONSERVATION DIVISION** PO Box 2088 Santa Fe, NM 87504-2088

Instruction on back Submit to Appropriate District Office 5 Copies

District IV PO Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

1.		R	EQUE	ST FOI	R ALLC)WA	BLE AND) AUT	HORIZ/	ATION TO	TRAN	ISPORT	.
			¹ Ope	erator Nam U.S.A.,	ne and Add	Iress		~				RID Number	er .
1		P. 0	O. Box	1150						³ Reason for	Filing (4323 Code New	Gas POD's;
4 A DI		Mid	land, T	TX 797	02		e			Delete Pre		Gas POD)'s
⁴ API 30 - 025 - 2	Number 29600	!				Eu <u>n</u> i	⁶ Pool Na ice Monum		SA			6 F	Pool Code 23000
⁷ Prope	erty Code						⁸ Property	/ Name				8 N	Vell Number
	616 Irface L	ocat	ion		<u> </u>	unice	Monument	t South	<u>Unit</u>			<u> </u>	311
Ul or Lot. No.			Township	Range	Lot I	ldn.	Feet from the	e Nort	th/South Line	ne Feet from the	e East	t/West Line	County
ı	11	-	218	36E	<u></u> :		2080		South	460	E	ast	Lea
	ttom H					 -							
UI or Lot. No.	Section		vnship	Range	Lot Idn		eet from the	<u></u>	South Line	Feet from the		Vest Line	County
12 Lse Code	13 Produc	<u> </u>		12	s Connection	n Date	¹⁵ C-129 Po	ermit Nur	nber 16	⁶ C-129 Effective Date 17 C-129 Expi			Expiration Date
III. Oil and		<u>Frans</u>					20						
¹⁸ Transport OGRID	ter		,, , 	Transporter and Add			د ۲۰۰۰	POD	²¹ O/G			ULSTR Loca d Description	
024650	ο	Warre	en Petro	oleum	_	_	281!	5419	G				
		P.O. E	3о <u>х 158</u>	39 <u>, Tulsa,</u>	, OK 741	102					L- <u>11</u>	-21S-36E	E
00917			Corp.				281	5420	G		<u>-</u>		
			-	ok, Odess	sa, TX 7	<u> 19762</u>				1-11	<u>- 11 :</u>	s. 3b	<u>e</u>
					······					<u> </u>			
IV. Produc		ater											
23 PC							POD ULS	STR Loca	ation and D	Jescription			
V. Well C	omplet oud Date	tion P		²⁶ Ready D	 Date	 	²⁷ TD			²⁸ PBTD		29	Perforations
				-					22.5	7 845		<u> </u>	
	³⁰ Hole Size	.6	—	٠. ر	Casing & Tu	o gnidu	ize		³² Depth	Set	-	33 Sacks	s Cement
			-+								-		
			-								1-		
											 		
VI. Well To	ant Da	<u></u>									<u> </u>		
34 Date N			³⁵ Gas De Date		36	⁸ Test D	Date	³⁷ Te	est Length	38 Tbg	g. Pressur	re 39	⁹ Csg. Pressure
⁴⁰ Choke	e Size		⁴¹ O	Dil		⁴² Wate	ter	43 Gas		. 44	⁴ AOF	4	¹⁵ Test Method
48 I hereby ce complied with									OIL (CONSERVA	ATION	I DIVISI	ON
complied with and that the information given above is true and complete the best of my knowledge and belief. Signature:								Approved by:					
Printed Name:	K. Riple	<u>ufix</u>	ry					Title:					
Title:		<u>.y</u>						Approv	ved Date:		/UE	; 09 10	205
Date: 7/2	26/95	_		Phone: (915)	6)687-714	48							
		of opera	ator fill in				ame of the pre	evious or	perator				
Previ	ious Opera	ator Sigr	nature				Printed Nam	10		Title			Date

Submit 5 Copies Appropriate District Office **DISTRICT 1** P. O. Box 1980, Hobbs, NM 88240

Energy, Minerals and Natural Resources Departms

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

OIL CONSERVATION DIVIS. N

P. O. Box 2088

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

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.											
Operator Chevron U.S.A., Inc.								ell API No. 0 - 025-29600			
Address								J - 023-27000			
P. O. Box 1150, Midland, TX 7 Reason (s) for Filling (check proper box)					T 1 Oth	eı (Please ex	-nlain)				
New Well		ge in Trans	sporter of:		LJ ~	[E] [1 16m3c cv	(puin)				
Recompletion	Oil		X Dry Ga								
Change in Operator	Casinghead Ga	s	Conden	ısate 🔲	· · · · · · · · · · · · · · · · · · ·						
If chance of operator give name and address of previous operator											
II. DESCRIPTION OF WELL Lease Name	AND LEASE	Well No.	Dool Name	Including Eq.			Iv:				
·		WEII ING.	Pool Name, I	including Fo	rmation		1	nd of Lease ite, Federal or Fee	Lease No	١.	
Eunice Monument South Unit		311	Eunic	e Monum	<u> </u>						
Location								<u> </u>	<u></u>		
Unit Letter I	:	2080	Feet From The	e <u>South</u>	Line	and	460	Feet From The	e <u>East</u> Line	;	
Section 11 Township	218		Range	36E	, NA	IPM,	Le		County		
III. DESIGNATION OF TRAN	SPORTER O										
Name of Authorized Transporter of Oil	X	or Conden	sate	Addre	ess (Giv	e address to	which appro	wed copy of this	form is to be sent)		
EOTT Oil Pipeline Co, ARCO,	Texas New 1	Mexico	Pipelir	ıe	P.O	. Box 4666	6, Houston	.TX 77210-4	666, Suite 2604		
Manne of Authorized Transporter of Casing	thead Gas	or D	y Gas	Addre	ess (Giv	e address to	which appro	wed copy of this	form is to be sent)		
Bive location of localine LI	P Unit	Sec.	Twp. Rge.	. Is gas a	actually conn	ected ?	When?				
Effective 4-1-94					Yes		TV-1				
If this production is commingled with that	from any other lea	se or pool,	give comming	ling order nu				Unknown			
IV. COMPLETION DATA							 -				
Decignate Tune of Completion	(V)	Oil Well	Gas Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v		
Designate Type of Completion Date Spudded	Date Compl. Rea	adv to Prod	1.	Total Depth	<u> </u>		P. B. T. D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Produc			Top Oil/Gas			<u> </u>				
	Ivanic of Fronce	mg rounes	10п	Top Oirow	s Pay		Tubing Dep	oth			
Peforations							Depth Casin; g				
	TU	BING, CAS	SING AND C	EMENTING	RECORD		l	·			
HOLE SIZE	CASING &	& TUBING	SIZE	Γ	DEPTH SET			SACKS C	EMENT		
				 							
V. TEST DATA AND REQUES	T FOR ALL	WARI	T	<u> </u>		_				_	
OIL WELL (Test must be after re				t he eaual to	or exceed to:	o allowable t	for this donth	· a= ha fa= full 21	L1		
Date First New Oil Run To Tank	Date of Test	 -	<u> </u>	Producing N	dethod	(Flow, pum	p, gas lift, etc	:.)	nours)		
Length of Test	Tubing Pressure			Casing Press	sure		Choke Size				
Actual Prod. During Test	Oil - Bbls.			Water - Bbls	ş.		Gas - MCF				
GAS WELL				L			<u> </u>				
Actual Prod. Test - MCF/D	Length of Test			Bbls. Conde	nsate/MMCF	:	Gravity of C	ondensate			
Testing Method (pilot, back press.)	Tubing Pressure ((Shut - in)		Casing Press	rure (Shut - i	n)	Choke Size				
											
I hereby certify that the rules and regulati					OIL	CONS	ERVAT	ION DIVIS	ION		
Division have been complied with and the	at the information	given abov	/e			_			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
is true and complete to the best of my kno	owledge and belief	f.		Date /	Approved	ı <u>FE</u>	<u>B 631</u>	994			
J.K. P.Clif				By _		H-CIANE	n RY JEO	Y SEXTON			
Signature J. K. Ripley	T.A.		-	Title DISTRICT I SUPERVISOR							
Printed Name	Title		_	71tle_						_	
12/8/93		87-7148	i								
Date		hone No.	-								

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
- 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.

blank

State of New Mexico

Submit 5 Copies
Appropriate District Office
DISTRICT I

P. O. Box 1980, Hobbs, NM 88240

DISTRICT II P. O. Drawer DD, Artesia, NM 88210 Energy, Minerals and Natural Resources Departme

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 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 - 025-29600								
Address P. O. Box 1150, Midland, TX 79	702	<u>-</u>											
Reason (s) for Filling (check proper box)						Ш	Other	(Please exp	lain)				
New Well		ge in Trans											
Recompletion Change in Operator	Oil Casinghead Ga	s		ry Gas ondensa	ate 📙								
If chance of operator give name and address of previous operator													
										-			
II. DESCRIPTION OF WELL A	AND LEASE	Well No.	Pool N	lame, In	cluding For	mation			1	Kind of Lease No.			
Eunice Monument South Unit	Cunice	Monument State, Federal or Fee											
Location													
Unit LetterI	:	2080	Feet Fro	om The	South	l	Line a	and	460	Feet From The	EastLine		
Section 11 Township	218		Rangi		36E		, NMI	РМ,	Lea		County		
III. DESIGNATION OF TRANS	SPORTER (OF OIL	AND N	IATU	RAL GA	. <u>S</u>							
Name of Authorized Transporter of Oil		or Conder	isate		Addr	ess	Give	address to	which approv	ch approved copy of this form is to be sent)			
FOTT Oil Pineline Co. ADCO. III	X Nov.	Movico	. Din	L Olina	,		P.O.	Box 4666	. Houston.	TX 77210-46	66, Suite 2604		
Name of Authorized Transporter of Casingle			y Gas	611116	Addr	ess					orm is to be sent)		
			·						*				
If well produces oil or liquids.	Unit	Sec.	Twp.	Rge.	Is gas	actually	conne	cted?	When?				
give location of tanks.						Yes				Unknown			
If this production is commingled with that f	rom any other le	ase or pool.	give co	mmingli	ing order n	ımber:							
IV. COMPLETION DATA	- · · · · · · · · · · · · · · · · · · ·	•				_		-					
		Oil Well	Gas	Well	New Well	Work	over	Deepen	Plugback	Same Res'v	Diff Res'v		
Designate Type of Completion		l <u>.</u>	Д		Total Dept	L			D D T D	<u> </u>	ļ		
Date Spudded Date Compl. Ready to Prod.						h			P. B. T. D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Produ	cing Forma	tion		Top Oil/Ga	s Pay			Tubing Dep	th			
Peforations						Depth Casin	Depth Casin; g						
	AND CH	EMENTIN	G REC	ORD		<u> </u>							
HOLE SIZE	CASING	& TUBING	G SIZE		DEPTH SET				SACKS CEMENT				
	-							 		- A4.			
											·		
V. TEST DATA AND REQUES	T FOR ALL	OWABI	LE							-			
OIL WELL (Test must be after re		volume of la	oad oil a								hours)		
Date First New Oil Run To Tank	Date of Test				Producing			(Flow, pum	p, gas lift, etc	·.) 			
Length of Test	Tubing Pressur	e			Casing Pressure				Choke Size				
Actual Prod. During Test	Oil - Bbls.	•			Water - Bb	ls.			Gas - MCF				
GAS WELL													
Actual Prod. Test - MCF/D	Length of Test				Bbls. Cond	ensate/	MMCF	7	Gravity of Condensate				
Testing Method (pilot, back press.)	Tubing Pressure	e (Shut - in)		Casing Pre	ssure (S	hut - ii	n)	Choke Size	Choke Size			
	<u> </u>								1				
I hereby certify that the rules and regulat	ions of the Oil C	onservation	1				OIL	. CONS	SERVAT	ION DIVIS	SION		
Division have been complied with and the is true and complete to the best of my kn		Date Approved FEF ≥ §34											
is the and complete to the best of my kin	Date Approved 715 1834												
MAK, KIDLEEF					Ву	——————————————————————————————————————	(Care	ILT CIONI	ED BY JSR	RY SEXTON			
Signature J. K. Ripley	T.A.				Title DISTRICT I SUPERVISOR								
Printed Name	Title						-						
12/8/93)687-7148											
Date	Tal	enhone No		I									

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.