

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

1a. TYPE OF WELL

OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. TYPE OF COMPLETION

NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐

2. Name of Operator

Chevron U.S.A. Inc.

3. Address of Operator

P.O. Box 670, Hobbs, NM 88240

4. Location of Well

UNIT LETTER O LOCATED 760 FEET FROM THE South LINE AND 2230 FEET FROM

THE East LINE OF SEC. 11 TWP. 21S RGE. 36E NMPM

7. Unit Agreement Name

Eunice Monument S. Unit

8. Farm or Lease Name

9. Well No.

349

10. Field and Pool, or Wildcat

Eunice Monument G/SA

12. County

Lea

15. Date Spudded

1-23-87

16. Date T.D. Reached

1-28-87

17. Date Compl. (Ready to Prod.)

7-5-87

18. Elevations (DF, RKB, RT, GR, etc.)

3581.9

19. Elev. Casinghead

20. Total Depth

4000'

21. Plug Back T.D.

22. If Multiple Compl., How Many

23. Intervals Drilled By

Rotary Tools
yes

Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name

Grayburg/SA (3920-3717)

25. Was Directional Survey Made
No

26. Type Electric and Other Logs Run

GR-CNJ, CCL

27. Was Well Cored

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	350	12 1/4"	250sx circ to surf.	
4 1/2	9.5	4000	7 7/8"	450sx circ to surf.	

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

1 JHPF

3920-3897, 3887-3878, 3853-3857, 3717, 3786-3792, 3780- 3785, 3768-3771, 3753-3755, 3835-3842, 3826-3833, 3819-3826.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
3920-3878	2500 gal 15% NEEF
3754-3858	3500 gal 15% NEEF

33. PRODUCTION

Date First Production 7-13-87		Production Method (Flowing, gas lift, pumping - Size and type pump) pumping				Well Status (Prod. or Shut-in) Prod	
Date of Test 8-10-87	Hours Tested 24	Choke Size 2"WO	Prod'n. For Test Period →	Oil - Bbl. 0	Gas - MCF 118	Water - Bbl. 63	Gas - Oil Ratio —
Flow Tubing Press. 45	Casing Pressure 45	Calculated 24-Hour Rate →	Oil - Bbl. .05	Gas - MCF 118	Water - Bbl. 63	Oil Gravity - API (Corr.) —	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Sold

Test Witnessed By

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED M. E. Akinn

TITLE STAFF DRILLING ENGINEER

DATE JULY 10, 1987

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

Northwestern New Mexico			
T. Anhy <u>no top</u>	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt <u>NO top</u>	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt <u>NO top</u>	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates <u>NO top</u>	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers <u>NO top</u>	T. Devonian	T. Menefee	T. Madison
T. Queen <u>3410</u>	T. Silurian	T. Point Lookout	T. Elbert
T. Grayburg <u>3716</u>	T. Montoya	T. Mancos	T. McCracken
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Qtzte
T. Glorieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinebry	T. Gr. Wash	T. Morrison	T.
T. Tubb	T. Granite	T. Todilto	T.
T. Drinkard	T. Delaware Sand	T. Entrada	T.
T. Abo	T. Bone Springs	T. Wingate	T.
T. Wolfcamp	T.	T. Chinle	T.
T. Penn.	T.	T. Permian	T.
T. Cisco (Bough C)	T.	T. Penn. "A"	T.

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....
 No. 2, from.....to.....
 No. 3, from.....to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from to feet.

No. 2, from to feet.

No. 3, from to feet.

No. 4, from to feet.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
3414	3716	306	Queen - Sand & Dolo				
3716	3988	272	Grayburg - Dolomitic				

STATE OF NEW MEXICO
OIL AND MINERALS DEPARTMENT

NO. OF COPIES ORDERED	
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NO OFFICE	
REPORTER	OIL
	NATURAL GAS
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Name Chevron U. S. A. Inc.	
Address P. O. 670, Hobbs, New Mexico 88240	
Reason for filing (Check proper box)	
☒ New Well	Change in Transporter of:
☐ Recompletion	☐ Oil ☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas ☐ Condensate
Other (Please explain)	

Age of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Name Eunice Monument	Well No. 349	Pool Name, including Formation Eunice Monument G-5A	Kind of Lease Fee	Lease No.
All Letter 0	: 760	Feet From The South Line and 2230	Feet From The East	
Line of Section 11	Township 21S	Range 36E	NUPM.	County Dea

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Area Shell & Texas Nrm Pipeline	
Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips 66 Nat Gas Corporation	
Unit PM	Sec. 4
Twp. 21S	Range 36E
Is gas actually connected? ☒	When

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

3: Complete Parts IV and V on reverse side if necessary.

CERTIFICATE OF COMPLIANCE

I 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 my knowledge and belief.

Area Sup.
(Signature)
8-18-87
(Date)

OIL CONSERVATION DIVISION

APPROVED **AUG 25 1987**, 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**
TITLE **DISTRICT 1 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 condition.
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. Res.
1-23-87	Date Compl. Ready to Prod.	7-5-87	Total Depth	4000'		P.B.T.C.		
3581.9	Name of Producing Formation	Drayton - 1A	Top Oil/Gas Pay			Tubing Depth		
Perforations (DF, RKB, RT, GR, etc.): 3920-3897, 3887-3878, 3853-3857, 3717; 3786-3792, 3780-3785, 3768-3771, 3753-3755, 3835-3842, 3826-3833, 3819-3826								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	350	250 SK Circ to Surf.
7 7/8"	4 1/2"	4000	450 SK Circ to Surf.

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.)
7-13-87	8-10-87	pump.
Time of Test	Tubing Pressure	Casing Pressure
24 HRS.	45	45
Oil Prod. During Test	Oil - Bbls.	Water - Bbls.
	0.5	63
		Choke Size
		2" WOOD
		Gas - MCF
		118

WELL

Oil Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

RECEIVED
AUG 20 1987
JCD
MORRIS SERVICE