

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

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. 30-025-30958
Address P.O. Box 1150, Midland, Texas 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Eunice Monument South Unit	Well No. 642	Pool Name, including Formation Eunice Monument/Grayburg -SA	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter Q : 1370 Feet From The South Line and 25 Feet From The East Line Section 6 Township 21S Range 36E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline, Tex. New Mex Pipeline, Arco Oil & Gas Co.	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum, Phillips 66 Natural Gas Co., & Texaco Production Co.	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit M Sec. 4 Twp. 21S Rgn. 36E	Is gas actually transported? 1992 When? 11/28/90

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 10/1/90	Date Compl. Ready to Prod. 10/31/90	Total Depth 4105'	P.B.T.D. 4022'					
Elevations (DF, RKB, RT, GR, etc.) 3578' GR	Name of Producing Formation Grayburg	Top Oil/Gas Pay 3760'	Tubing Depth 3962'					
Perforations 3760'-3942'			Depth Casing Shoe 4105					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	1206	800ex "C" Circ. 30ex					
7 7/8	5 1/2	4105	840ex "C" Circ. 97ex					
	2 3/8	3962						

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 11/4/90	Date of Test 11/25/90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24hrs	Tubing Pressure 30psi	Casing Pressure 0psi	Choke Size N.A.
Actual Prod. During Test	Oil - Bbls. 23	Water - Bbls. 107	Gas- MCF 58

GAS WELL

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

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.

Signature D.M. Bohon  
D.M. Bohon Technical Assistant  
Printed Name  
Date 11/28/90 (915) 687-7148  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 1 1990  
By Paul R. Ruiz  
Geologist  
Title

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) See also Form C-104 must be filed for each well in multiple completed wells.