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 Reviewd 1.1.89 at Bottom of Page

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION I. TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. Chevron U.S.A., Inc. 30-025-31320 Address P.O. Box 1150 Midland, TX 79702 Reason(s) for Filing (Check proper box) Other (Please explain) New Well X Change in Transporter of: X Recompletion Dry Gas Change in Operator Casinghead Gas Condensate If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease Name Kind of Lease State, Federal or Fee Well No. | Pool Name, Including Formation Lease No. Harry Leonard (NCT-A) 13 **Eumont Yates 7R Queen** State Location \_\_ Line and 2310 , 1650 Feet From The South Unit Letter \_ \_ Feet From The East Line 22 215 Range 36E Township NMPM, Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) Warren Petroleum Co. P. O. Box 1589, Tulsa, OK 74102 If well produces oil or liquids, Unit Twp. Sec Is gas actually connected? When ? give location of tanks. 3-12-92 3/15/92 If this production is commingled with that from any other lease or pool, give commingling order number: see connect IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Res'v Designate Type of Completion - (X) X X Date Spudded Total Depth Date Compl. Ready to Prod. P.B.T.D. 9/14/91 10/12/91 3700' 3685' Elevations (DF, RKB, RT, GR, etc.) Top Oil/Gas Pay Name of Producing Formation Tubing Depth 3585.2' GE Yates 7R Queen 3076 3006 Depth Casing Shoe 3085'-3672' TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE **DEPTH SET** SACKS CEMENT 12-1/4" 1479' 8-5/8" 950 7-7/8" 5-1/2" 3700 400 2-3/8" 3006 '. 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 Casing Pressure Choke Size **Tubing Pressure** Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas- MCF **GAS WELL** Actual Prod. Test - MCF/D Length of Test Bbls, Condensate/MMCF Gravity of Condensate 1077 24 hrs Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Flowing 165# 36/64 VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above MAR 20%

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

is true and complete to the best of my knowledge and belief.

K. Ripley

3/17/92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

Date Approved \_

THE STEATED BY STREY SEXTON VIITAKI, DESTUTOR

2) All sections of this form must be filled out for allowable on new and recompleted wells.

**Tech Assistant** 

Title

Telephone No.

(915)687-7148

- 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.

Printed Name

Date