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

## State of New Mexico Energy, Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

1.		TO TRA	ANSP	ORT OI	L AND NA	TURAL G					
Operator Chevron U.S.A.,	Chevron U.S.A., Inc.						Well API No. 30-025-31433				
Address P.O. Box 1150	Midland, TX	79702	2		· · · · · · · · · · · · · · · · · · ·		<del></del>				
Reason(s) for Filing (Check proper bo	x)	····		···	Oth	er (Please exp	lain)	<del></del>	· · · · · · · · · · · · · · · · · · ·		
New Well X	7	Change in	Transpo	orter of:							
Recompletion	Oil		Dry G								
Change in Operator	Casinghead	46	Conde								
If change of operator give name	Cangier	d Cas	Conce			<del></del> -	-				
and address of previous operator				<del></del>			·		·	<del></del>	
II. DESCRIPTION OF WEL	L AND LEA		T= 4.5			<del></del>	T V:- 4		<del></del>		
Lease Name	_	Well No.   Pool Name, Includi						ind of Lease Lease No tate, Federal or Fee		esse No.	
Arrowhead Grayburg Un	it	125	Arro	whead G	rayburg		Stat	e		<del></del>	
Location											
Unit Letter H	.2075		Feet Fr	om The No	orth Lin	e and 660	F	eet From The	East	Line	
Section 35 Township 21S			Range 36E , NMPM				1.55			C	
1041	antp					мгм,	<del></del>	Lea		County	
III. DESIGNATION OF TRA  Name of Authorized Transporter of Oil		or Conden		D NATU		e address to w	hich approve	d come of this (	form is to be se		
Texas New Mexico Pipelir		51 CONGRE			number (U/I		• •	lobbs, NM		,	
Name of Authorized Transporter of Ca		[%]	or Dry	Gas 🗍	Address (Giv	e address to w	<del></del>	<del> </del>		ent)	
Texaco Expl & Prod								Tulsa, OK			
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actuall		When				
give location of tanks.		1	225	36E	<u> </u>	Yes		7	/1/92		
f this production is commingled with the	at from any other	er lease or	pool, giv	e commingl	ing order num	ber:					
IV. COMPLETION DATA							··				
Designate Type of Completion	on - (X)	Oil Well	(	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	J	- Prod		Total Depth	I	J	I DOTO	<u> </u>	<del></del>	
6/2/92	Date Comp	-			Tom Depar	3953'		P.B.T.D.	_		
<u></u>	N: 6 D	6/29			Top Oil/Gas			<del> </del>			
Elevations (DF, RKB, RT, GR, etc.) 3549' GE  Name of Producing Formation Grayburg					† * ·			Tubing Depth			
					<u> </u>	3754'		3870° Depth Casing Shoe			
Perforations		3754'-	3948'					Depth Casin	ig Shoe		
	T	UBING.	CASIN	NG AND	CEMENTI	NG RECOR	ED .				
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
12-1/4"		8-5/8			1330'			1	830 sx		
7-7/8"	-	5-1/2			3953'		·	+	1090 sx		
. 170		0.7(0)			3870'						
	··-	,						<del>                                     </del>	<del> </del>	· · · · · ·	
. TEST DATA AND REQU	EST FOR A	LLOWA	BLE		l			J			
OIL WELL (Test must be afte				il and must	be equal to or	exceed top all	owable for the	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test					thod (Flow, pr					
7/3/92 7/3/92					Pumping						
ength of Test	Tubing Pres	SITE.			Casing Pressu	ire		Choke Size			
24 hrs	Tuoing Trea	35#			35#			2"			
Actual Prod. During Test	Oil - Bbls.	<del></del>			Water - Bbls.			Gas- MCF			
360	On - Boia.	14			346			63			
GAS WELL				· ·	<del> </del>					<del></del>	
Actual Prod. Test - MCF/D	Length of T	est			Bbls. Conden	sate/MMCF		Gravity of C	Condensate		
osting Method (pitot, back pr.)	Tubing Pres	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
// ODED ATOD CEDTER	CATE OF	COLO	TTAN	CE	<u>                                     </u>			.1.			
/I. OPERATOR CERTIFI				ندب	(	DIL CON	<b>ISERV</b>	ATION!	DIVISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above					N						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					JUL 1 3 '92						
					Date	Approve	<b>u</b>				
OK Kindous					[]						
Silvery					By GRIGHIAL SIGNED BY JERRY SEXTON						
Signature  J. K. Ripley  Tech Assistant					DISTRIGT I SUPERVISOR						
Printed Name			Title		Title				ميسي يت		
7/10/92		(915)6							· - · · · ·		
Date		Teles	nhone No	n	11						

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.