

DISTRIBUTION
 SANTA FE
 FILE
 U.S.G.S.
 LAND OFFICE
 TRANSPORTER
 OIL
 GAS
 OPERATOR
 PRODUCTION OFFICE
 Operator

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes OIL C-101 and C-1
 Effective 1-1-65

Chevron U.S.A. Inc.
 Address

P. O. Box 670, Hobbs, NM 88240

Reason(s) for filing (Check proper box) Other (Please explain)
 New Well ☐ Change in Transporter of:
 Recompletion ☐ Oil ☒ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE
 Lease Name: Gutman Well No.: 2 Pool Name, including Formation: Jubilee Gas Kind of Lease: State, Federal (or Fee) Lease No.:
 Location:
 Unit Letter: C : 1666 Feet From The North Line and 1980 Feet From The West
 Line of Section: 19 Township: 22S Range: 38E N.M.P.M. Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
None
 Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Harper Petroleum Northern Natural Gas Co. Box 1584, Tulsa, OK 74106
Box 308, Omaha, Nebraska 68101
 Is well produces oil or liquids, give location of tanks. Unit Soc. Twp. Pge. Is gas actually connected? When
Yes Unknown

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

COMPLETION DATA
 Designate Type of Completion - (X)
 Date Spudded Date Compl. Ready to Prod. Total Depth P.D.T.D.
 Elevations (D.F., RKB, RT, CR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
 Perforations Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD
 HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
 H. WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)
 Site First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
 Length of Test Tubing Pressure Casing Pressure Choke Size
 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
 Casing Method (shot, back pr.) Tubing Pressure (shot-in) Casing Pressure (shot-in) Choke Size

CERTIFICATE OF COMPLIANCE
 I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
 [Signature]
 DIV. PETR. ENGINEER
 9-12-85
 (Date)
 OIL CONSERVATION COMMISSION
 SEP 16 1985
 APPROVED _____, 19
 BY _____ ORIGINAL SIGNED BY _____ DISTRICT SUPERVISOR
 TITLE _____
 This form is to be filed in compliance with RULE 1104.
 If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation logs 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.

RECEIVED

SEP 13 1985

COB
HOBBS OFFICE