

Submit to Appropriate District Office
 State Lease - 6 copies
 Fee Lease - 5 copies
DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-105
 Revised 1-1-89

OIL CONSERVATION DIVISION
 P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-25499
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____	7. Lease Name or Unit Agreement Name A. L. Christmas (NCT-C)
b. Type of Completion: NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> DIFF RESVR <input type="checkbox"/> OTHER _____	
2. Name of Operator Chevron U.S.A., Inc.	8. Well No. 9
3. Address of Operator P.O. Box 1150 Midland, TX 79702	9. Pool name or Wildcat Eumont Yates 7R Queen

4. Well Location
 Unit Letter G : 1680 Feet From The North Line and 2166 Feet From The East Line
 Section 18 Township 22S Range 37E NMPM Lea County

10. Date Spudded	11. Date T.D. Reached	12. Date Compl. (Ready to Prod.) 10/23/91	13. Elevation: (DF& RKB, RT, GR, etc.) 3417' GE	14. Elev. Casinghead
15. Total Depth 6750'	16. Plug Back T.D. 5365'	17. If Multiple Compl. How Many Zones?	18. Intervals Drilled By Rotary Tools <input checked="" type="checkbox"/> Cable Tools _____	
19. Producing Interval(s), of this completion - Top, Bottom, Name 3430'-3566' Yates 7R Queen			20. Was Directional Survey Made No	
21. Type Electric and Other Logs Run N/A			22. Was Well Cored No	

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

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
No New Casing					

24. LINER RECORD					25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2-3/8"	3577'	

26. Perforation record (interval, size, and number) 3430'-3566' 4" 1 JHPF (26 holes)	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.	
	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
	3430-3566'	1250 gals 15% NEFE, 52,000 gals gel, 80,000# sd

28. PRODUCTION

Date First Production 10/25/91		Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping				Well Status (Prod. or Shut-in) Prod	
Date of Test 10/27/91	Hours Tested 24	Choke Size 2"	Prod'n For Test Period	Oil - Bbl. 30	Gas - MCF 258	Water - Bbl. 44	Gas - Oil Ratio 8600
Flow Tubing Press. 30#	Casing Pressure 30#	Calculated 24-Hour Rate	Oil - Bbl. 30	Gas - MCF 258	Water - Bbl. 44	Oil Gravity - API - (Corr.) 30.0	

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

Test Witnessed By _____

30. List Attachments

31. 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

Signature J. K. Ripley Printed Name J. K. Ripley Title Technical Assistant Date 11/8/91

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

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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**

Operator Chevron U.S.A., Inc.		Well API No. 30-025-25499
Address P.O. Box 1150 Midland, TX 79702		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> <input type="checkbox"/> Change in Transporter of: Recompletion <input checked="" 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"/>		<input type="checkbox"/> Other (Please explain)

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name A. L. Christmas (NCT-C)	Well No. 9	Pool Name, Including Formation Eumont Yates 7R Queen	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter G : 1680 Feet From The North Line and 2166 Feet From The East Line Section 18 Township 22S Range 37E , NMPM , Lea County				

Cancel Blinetry allow

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Pride Operating Co. <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436, Abilene, TX 79604					
Name of Authorized Transporter of Casinghead Gas Warren Petroleum <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When? Unknown

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod. 10/23/91		Total Depth 6750'		P.B.T.D. 5365'			
Elevations (DF, RKB, RT, GR, etc.) 3417' GE	Name of Producing Formation Yates 7R Queen		Top Oil/Gas Pay 3430'		Tubing Depth 3577'			
Perforations 3430'-3566'						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE No New Casing	CASING & TUBING SIZE 2-3/8" tubing		DEPTH SET 3577'			SACKS CEMENT		

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 10/25/91	Date of Test 10/27/91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 30#	Casing Pressure 30#	Choke Size 2"
Actual Prod. During Test 74	Oil - Bbls. 30	Water - Bbls. 44	Gas- MCF 258

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.

J. K. Ripley
Signature
J. K. Ripley Tech Assistant
Printed Name
11/8/91 Title
Date
(915)687-7148 Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____
By _____
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) Separate Form C-104 must be filed for each pool in multiply completed wells.