

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

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

Form C-105  
Revised 1-1-89

|   |
|---|
| WELL API NO.<br>30-025-25594  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>A. L. Christmas (NCT-C)                                     |
| 8. Well No.<br>11   |
| 9. Pool name or Wildcat<br>Blinebry 7937-8/1/93   |

|   |                             |   |   |  |  |
|---|-----------------------------|---|---|--|--|
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG  |                             |   |   |  |  |
| 1a. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>   |                             |   |   |  |  |
| b. Type of Completion:<br>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 <input type="checkbox"/> |                             |   |   |  |  |
| 2. Name of Operator<br>Chevron U.S.A., Inc.   |                             |   |   |  |  |
| 3. Address of Operator<br>P. O. Box 1150, Midland, TX 79702   |                             |   |   |  |  |
| 4. Well Location<br>Unit Letter H : 1780 Feet From The North Line and 810 Feet From The East Line<br>Section 18 Township 22S Range 37E NMPM Lea County  |                             |   |   |  |  |
| 10. Date Spudded  | 11. Date T.D. Reached       | 12. Date Compl. (Ready to Prod.)<br>2/16/93 | 13. Elevations (DF& RKB, RT, GR, etc.)<br>3413' GR  | 14. Elev. Casinghead<br>--   |  |
| 15. Total Depth<br>6700'  | 16. Plug Back T.D.<br>6365' | 17. If Multiple Compl. How Many Zones?      | 18. Intervals Drilled by<br>Rotary Tools <input checked="" type="checkbox"/> Cable Tools <input type="checkbox"/> | 19. Producing Interval(s), of this completion - Top, Bottom, Name<br>5422'-5760' |  |
| 21. Type Electric and Other Logs Run  |                             |   |   | 20. Was Directional Survey Made  |  |
| 21. Type Electric and Other Logs Run  |                             |   |   | 22. Was Well Cored   |  |

|  |               |            |                               |                  |               |
|--|---------------|------------|-------------------------------|------------------|---------------|
| 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   |               |            |                               |                  |               |
| SIZE   | TOP           | BOTTOM     | SACKS CEMENT                  | SCREEN           |               |
|  |               |            |                               |                  |               |
| 25. TUBING RECORD  |               |            |                               |                  |               |
| SIZE   | DEPTH SET     | PACKER SET |                               |                  |               |
| 2-3/8"   | 5852'         | --         |                               |                  |               |
| 26. Perforation record (interval, size, and number)<br>5422'-5760' 1 JHPF (18 holes) |               |            |                               |                  |               |
| 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.                                      |               |            |                               |                  |               |
| DEPTH INTERVAL   |               |            | AMOUNT AND KIND MATERIAL USED |                  |               |
| 5422'-5760'  |               |            | 90 bbls 15% NEFE HCL,         |                  |               |
|  |               |            | 36,000 gals gel & 100,800# s  |                  |               |

|  |                       |  |                        |                  |                    |  |                         |
|--|-----------------------|--|------------------------|------------------|--------------------|--|-------------------------|
| 28. PRODUCTION   |                       |  |                        |                  |                    |  |                         |
| Date First Production<br>2/16/93                                   |                       | Production Method (Flowing, gas lift, pumping - Size and type pump)<br>Pumping |                        |                  |                    | Well Status (Prod. or Shut-in)<br>Prod |                         |
| Date of Test<br>4/13/93  | Hours Tested<br>24    | Choke Size<br>W.O.   | Prod'n For Test Period | Oil - Bbl<br>43  | Gas - MCF<br>149   | Water - Bbl<br>246                     | Gas - Oil Ratio<br>3465 |
| Flow Tubing Press.<br>35   | Casing Pressure<br>35 | Calculated 24-Hour Rate  | Oil - Bbl<br>43        | Gas - MCF<br>149 | Water - Bbl<br>246 | Oil Gravity - API - (Corr.)<br>34.2    |                         |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.)<br>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 <i>J.K. Ripley</i>   |  | Printed Name J. K. Ripley |  | Title T.A. |  | Date 4/19/93 |  |

P. O. Box 2088

**Santa Fe, New Mexico 87504-2088**

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

|   |                                       |
|---|---------------------------------------|
| Operator<br><b>Chevron U.S.A., Inc.</b>   | Well API No.<br><b>30 - 025-25594</b> |
| Address<br><b>P. O. Box 1150, Midland, TX 79702</b>   |                                       |
| Reason (s) for Filling (check proper box) <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="width: 45%;"> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="width: 45%;">           New Well <input type="checkbox"/><br/>           Recompletion <input checked="" type="checkbox"/><br/>           Change in Operator <input type="checkbox"/> </div> <div style="width: 45%;">           Change in Transporter of:<br/> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%;">               Oil <input type="checkbox"/><br/>               Casinghead Gas <input type="checkbox"/> </div> <div style="width: 45%;">               Dry Gas <input type="checkbox"/><br/>               Condensate <input type="checkbox"/> </div> </div> </div> </div> <div style="width: 50%; text-align: center;"> <input type="checkbox"/> Other (Please explain)         </div> </div> </div> |                                       |
| If chance of operator give name and address of previous operator <div style="text-align: right; margin-top: 20px; font-style: italic;">           Cancel Drunkard allow         </div>  |                                       |

## II. DESCRIPTION OF WELL AND LEASE

|  |          |                                |  |           |
|--|----------|--------------------------------|--|-----------|
| Lease Name   | Well No. | Pool Name, Including Formation | Kind of Lease<br>State, Federal or Fee | Lease No. |
| A. L. Christmas (NCT-C)  | 11       | Blinebry                       | Fee                                    |           |
| Location   |          |                                |  |           |
| Unit Letter <u>H</u> : <u>1780</u> Feet From The <u>North</u> Line and <u>810</u> Feet From The <u>East</u> Line |          |                                |  |           |
| Section <u>18</u> Township <u>22S</u> Range <u>37E</u> , NMPM. Lea County  |          |                                |  |           |

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |      |      |      |      |  |         |
|---|------|------|------|------|--|---------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>                    |      |      |      |      | Address (Give address to which approved copy of this form is to be sent) |         |
| Pride Pipeline Co.  |      |      |      |      | P. O. Box 2436, Abilene, TX 79604  |         |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> |      |      |      |      | 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,<br>give location of tanks.   | Unit | Sec. | Twp. | Rge. | Is gas actually connected ?  | When ?  |
|   |      |      |      |      | Yes  | 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<br>X | Gas Well                 | New Well | Workover | Deepen                | Plugback<br>X | Same Res'v | Diff Res'v |
| Date Spudded                                   | Date Compl. Ready to Prod.<br>02/16/93  |               | Total Depth<br>6700'     |          |          | P. B. T. D.<br>6365   |               |            |            |
| Elevations (DF, RKB, RT, GR, etc.)<br>3413' GR | Name of Producing Formation<br>Blinebry |               | Top Oil/Gas Pay<br>5422' |          |          | Tubing Depth<br>5852' |               |            |            |
| Peforations<br>5422'-5760'                     |   |               |                          |          |          | Depth Casing Shoe     |               |            |            |
| TUBING, CASING AND CEMENTING RECORD            |   |               |                          |          |          |                       |               |            |            |
| HOLE SIZE                                      | CASING & TUBING SIZE                    |               | DEPTH SET                |          |          | SACKS CEMENT          |               |            |            |
| No New Casing                                  |   |               |                          |          |          |                       |               |            |            |
|  |   |               |                          |          |          |                       |               |            |            |
|  |   |               |                          |          |          |                       |               |            |            |
|  |   |               |                          |          |          |                       |               |            |            |

## 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<br><b>02/16/93</b> | Date of Test<br><b>4/13/93</b> | Producing Method<br><b>Pump</b><br>(Flow, pump, gas lift, etc.) |                          |
| Length of Test<br><b>24 hrs</b>                   | Tubing Pressure<br><b>35#</b>  | Casing Pressure<br><b>35#</b>                                   | Choke Size<br><b>W.O</b> |
| Actual Prod. During Test<br><b>289</b>            | Oil - Bbls.<br><b>43</b>       | Water - Bbls.<br><b>246</b>                                     | Gas - MCF<br><b>149</b>  |

## GAS WELL

|                                     |                             |                             |                       |
|-------------------------------------|-----------------------------|-----------------------------|-----------------------|
| Actual Prod. Test - MCF/D           | Length of Test              | Bbls. Condensate/MMCF       | Gravity of Condensate |
| Testing Method (pilot, back press.) | 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<br><b>J. K. Ripley</b> | T.A.                          |
| Printed Name<br><b>4/19/93</b>   | Title<br><b>(915)687-7148</b> |
| Date                             | Telephone No.                 |

## OIL CONSERVATION DIVISION

Date Approved APR 22 1993

By \_\_\_\_\_, Signed by \_\_\_\_\_

**Title** Paul Isaacs  
Geology

**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.

**blank**

31. Dunkard