

## OIL CONSERVATION DIVISION

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

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

I.

Operator Chevron U.S.A., Inc.	Well API No. 3002526051
Address P. O. Box 670 Hobbs, NM 88240	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <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"/>

If change of operator give name  
and address of previous operator

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Mark	Well No. 11	Pool Name, including Formation Blinebry	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter A : 430 Feet From The North Line and 960 Feet From The East Line Section 3 Township 22S Range 37E, NMPM, Lea County				

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

Name of Authorized Transporter of Oil Shell Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910 Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas Warren Petroleum	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. Rgs. Is gas actually connected? When?
A 3 22S 37E	yes 7-25-90

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 X	Gas Well	New Well	Workover	Deepen	Plug Back X	Same Res'v	Diff Res'v
Date Spudded 8-78	Date Compl. Ready to Prod. 7-25-90	Total Depth 7618'	P.B.T.D. 6574'					
Elevations (DF, RKB, RT, GR, etc.) 3393' GL	Name of Producing Formation Blinebry	Top Oil/Gas Pay 5624'	Tubing Depth 5884'					
Perforations 5684'-5819' 4" 1JHPF ttl 16 holes		Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	1143'	550 sx					
7 7/8"	5 1/2"	7618'	1875 sx					
	2 3/8"	5884'						

### 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 7-25-90	Date of Test 8-7-90	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs	Tubing Pressure 60#	Casing Pressure 110#	Choke Size 2" WO
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 6	Gas- MCF 456

#### 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.

Signature  
C. L. Morrill NM Production Supt  
Printed Name  
8/9/90 (505) 393-4121  
Date  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved NOV 02 1990  
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
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.