State of New Mexico ergy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

District RC PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Instruction on back Submit to Appropriate District Office 5 Copies

1000 Rio Brazos Rd., Aztec, NM 87410

District IV PO Box 2088, Santa Fe, NM	87504-2088					□ аме	ENDED REPORT	
1.	REQUEST FOR		BLE AND A	UTHORIZA	TION TO T			
¹ Operator Name and Address Chevron U. S. A., Inc.						² OGRID Number 4323		
P. O. Box 1150 Midland, TX 79702						³ Reason for Filing Code New Gas POD's; Delete Previous Gas POD's		
⁴ API Number ⁵ Pool Name					⁶ Pool Code 3040			
⁷ Property Code			⁸ Property Name ad Grayburg Unit				Well Number 202	
2571 II. ¹⁰ Surface Loca	 ition	Allowii	eau Grayoui	g Oint				
Ul or Lot. No. Section	Township Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Li	ine County	
L 07	22S 37E		1950	South	350	West	Lea	
11 Bottom Hole		Lot Idn. F	eet from the	North/South Line	Feet from the	East/West Line	County	
Ul or Lot. No. Section To	ownship Range	Lot Idri.	eet nom me	NOTH BOOKIN LINE	r cet nom the	Luci Front Line	, , , , , , , , , , , , , , , , , , , ,	
¹² Lse Code ¹³ Producing N	lethod Code 14 Gas	Connection Date	¹⁵ C-129 Peri	mit Number 16	C-129 Effective D	Date 17 C-1	29 Expiration Date	
P P								
	Oil and Gas Transporters			20 POD 21 O/G 22 POD ULSTR Location			Location	
OGRID	18 Transporter 19 Transporter Name OGRID and Address			and Description				
024650 Wa	024650 Warren Petroleum			2815746 G				
P.O	P.O. Box 1589, Tulsa, OK 74102			G-12-22S-36E			-36E	
022345 Te>				2815747 G				
	P. O. Box 4325, Houston, TX 77210			G-12-22S-36E				
IV. Produced Water					<u> </u>			
23 POD			²⁴ POD ULS	TR Location and I	Description			
V. Well Completion	Data				²⁸ PBTD			
²⁶ Spud Date	²⁶ Ready Date		²⁷ TD	²⁷ TD			²⁹ Perforations	
³⁰ Hole Size	31 C	31 Casing & Tubing Siz		e ³² Depth		33 S	Sacks Cement	
VI. Well Test Data								
³⁴ Date New Oil	³⁵ Gas Deliver y Date	³⁶ Test	Date	³⁷ Test Length	³⁸ Tbg	g. Pressure	³⁹ Csg. Pressure	
⁴⁰ Choke Size	⁴¹ Oil	42 Wa	ater	⁴³ Gas	⁴⁴ AOF		⁴⁵ Test Method	
46 hereby certify that the	L. Adv. Oil Com	Division Divisio	n have been		001105014	ATION DU	/ICION	
complied with and that the the best of my knowledge a	information given ab	ove is true and	complete to		CONSERVA			
Signature: O.K. Ri	pleu			Approved by:OR		U 60 CURRY UPBRYISOI		
Printed Name				Title:				
J. K. Ripley				Approved Date:		<u></u> ,	A Secretary	
T.A. Date: Phone:					 	1 11 2 11	<u></u>	
10/25/95 (915)687-7148				And the second s			AL NOTES AND ADDRESS OF THE PARTY OF THE PAR	
47 If this is a change of o	perator fill in the OGF	ID number and	name of the pre	evious operator				
Previous Operator	Signature		Printed Nam	e	Tat e		Date	