

STRICT II
D. Drawer DD, Artesia, NM 88210

STRICT III
00 Rio Brazos Rd., Aztec, NM 87410

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

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

Operator	Chevron U.S.A., Inc.	Well API No.	30-025-22254
Address	P. O. Box 670, Hobbs, New Mexico 88240		
Reason(s) for Filing (Check proper box)	<input type="checkbox"/> Other (Please explain)		
New Well	<input type="checkbox"/>	Change in Transporter of:	
Completion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>
Change of operator give name and address of previous operator	Damson Oil Corp. Box 4391 - Damson Towers, Houston, Texas 77210		

DESCRIPTION OF WELL AND LEASE

Well Name	Saltmount	Well No.	2	Pool Name, Including Formation	Imperial Tubb Frankford	Kind of Lease	State, Federal or (Fee)	Lease No.
Location	Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line							
Section	21	Township	23S	Range	37E	NMPM	Lea	County

I. 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)				
Shell Oil Corporation		12 Box 576 - Houston, TX 77001				
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas Co		12 Box 1492 - El Paso, TX 79999				
Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
	D-8	21	23S	37E		
this production is commingled with that from any other lease or pool, give commingling order number: DHC-168						

VI. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
late Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Drillations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	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
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*
C. L. Morrill - New Mexico Area Supt.
Printed Name: May 1, 1989 505-393-4121 Title: _____
Date: _____ Telephone No.: _____

OIL CONSERVATION DIVISION
MAY 2 1989

Date Approved: _____

By: **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title: _____

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