	DESTRUCTION SANTA EV LIVE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE		ODE CVATION COMMEST FOR ALLOVABLE AND NSPORT OIL AND NAT	Supersedy & L'itacrivo 1	Old C-101 and C-110
'	Chevron U.S.A.	. Tnc.			
-	Acctress				
	P. O. Box 1660), Midland, Texas	0 79701	oria 1	
	Resson(s) for filing (Check proper box)	Change in Transporter of:	Oluga la tenza exte		
	Recompletion	OII Dry Ga	2		
-	Change in Ownership X	Caalnghead Gas Canden	sale		
ĺ		1 Stateline (Eller 80 Feet From The East Lin	nburger) State	e, Foderal or Fee State	D-2657
l	Line of Section 5 Towns	thip 24-South Range 30-	-East , NMPM, I	ea	County
	DESIGNATION OF TRANSPORTE Name of Authorized Transporter of Cal L Shell Pipeline Corporation Name of Authorized Transporter of Casino	or Condensate	P. O. Box 1910, Address (Give address to wh	ich approved copy of this form Iidland, Texas 79701 Ich approved copy of this form Idessa, Texas 79750	is to be sent)
	Phillips Petroleum Company	July Sec. Twp. P.ge.	Is gas actually connected?	When When	
	If well produces oil or liquids, give location of tanks,	B 5 24-8 33-E	Yes	May 11, 1906	
	If this production is commingled with COMMERCION DATA Designate Type of Completion Date Spudded	Oti Well Gas Well			Resty, Unif. Resty,
	illevations (DE, Ki.E, RT, GR, etc.)	tame of Producing Formation	Top Oll/Gas Pay	Tuking Depth	

ame Resty, Unif. Resty. Depth Castng Shoe Perforetiona TUDING, CASING, AND CHMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUDING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allows able for this depth or be for full 21 hours)

7. THE PRITA AND REQUEST FOR ALLOWABLE OH. WELL Producing Methol (Flow, gamp, gas lift, etc.) Date Phat New Oil fe a To Tanks Date of Test Choke Size Coaing Propauro Tubing Prossure Langth of Test Gan - MCF Water - isble. Actual Fred, Luring 7631 O11-8510.

GAS WELL			To the state of th
	Langth of Test	Bbls. Condensate/NMOF	Gravity of Condensate
•			
Weating Frathed (pilot, back pr.)	Tabing Prossure (Ehut-in)	Cauma Pronunce (Shut-in)	Choke Size
the time to the ti	, ,		
		,	

T. CENTINICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with end that the information given above is tree and resupirion to the body of my knowledge and belief.

produ (Signature) W. A. Goudeau Area Supervisor

March 2, 1977

(Date)

(lide)

OIL CONSERVATION COMMISSION

APPROVED. 11 DY____ II.

TITLE ____ This form is to be filed in compliance with RULE 1104.

If this is a request for alloyable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with house its.

All positions of this form part to filled our congletely for allow-thin on new and recompleted walls.

FIII out only factions I. II, III, and VI for changes of aware, will name of number, or trousporter, or other such change of numbers.

DISTRIBUTION	-				
SANTA FE	. NE		CONTEST I	F KIDDMMISSION DAABUE	Form C-104 Supersedes Old C-104 and C C.Effective 1-1-85
U.S.G.S.	. AUTHORIZ	ATION TO TR	41.69 1	ID NATU	SAL GAS
IRANSPORTER OIL					ें ें 5 िं 1 '6 6
OPERATOR PRORATION OFFICE					MAY 1, 1970, STANDARD OF COMPANY OF TEXAS IS CHAN
Operator	of Texas -	A Divisio	n of Chev	ron Oil Com	ING ITS OPERATING NAME TO
3610 Avenue S - Sny					
Reason's) for filing (Check proper box)	· · · · · · · · · · · · · · · · · · ·		-	$\frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} p_0^2 t$	7,
New Well French letich	Change in Era Til		<u>.</u>	Effective !	iay 11, 1966
to mage in townership	Dasinthead Gr	<u> </u>			
If change of ownership give name and address of previous owner				_	
DESCRIPTION OF WELL AND Decise Name	LEASE				8 nd of Lease
Continental State				Ellenburger	: Slate, Federal or Fee State
Chit Letter B : 198	80 Feet From Th	East		860	From The North
Line of Section 5 Tox	washir 248		38 e		Lea To init
DESIGNATION OF TRANSPORT	TER OF OIL AN	D NATURAL 6	iAS		
Marie of Authorized Transporter of 35	or Consei			i sastronti	tapproved ropy of this form is to be sent-
Name of Authorized Transporter of Cas		#IF ## [] T	TP (h approved copy of this form is to be sent)
Phillips Petroleum Con	Tinn Sec.	with 100 and 1		Box 6666, 0	When
give location of tanks.	B 5	248 38E		Yes	May 11, 1966
If this production is commingled with COMPLETION DATA		mer Pase in good	e ger		pen
Designate Type of Completic	on = (X)				1
Elevations /DF, RKB, RT, GR, etc.,					ucina Depth
Perforations	<u>.:</u> .		-		epth Casing Shoe
	TUB	ING, CASING, A	uo ce×c .	NE PECORD	CACKE CEMENT
HOLE SIZE					SACKS CEMENT
	<u>i</u>				
Oll. WELL Date First New Oil Bun To Tanks	Date of Test	ible for this	Terta . at	toka splume of a Laboursy Local Flow pump	o, gas lift -tc./
	Tubing Pressure				Choke Size
Length of Test					
Actual Prod. During Test	Oil-Bais.			÷	ias - MOF
GAS WELL					
	Length of Test		7	te are MACF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure			the said	Choke Size
CERTIFICATE OF COMPLIAN	ice			Dal CONS	SERVATION COMMISSION
CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied above is true and complete to the	regulations of the	Oil Conservation	ು ಕ್ರಾಥಾಶ್ಯ	s 2 5 <u> </u>	, 19
I hereby certify that the rules and	regulations of the	Oil Conservation	: 'ह:'=' :: :: :: ******	. <u> </u>	
I hereby certify that the rules and Commission have been complied above is true and complete to th	regulations of the with and that the best of my know	Oil Conservation	on APRY 83 1 - 원:고급 7:10:11	is form is to be f.	aled in compliance with RULE 1104.
I hereby certify that the rules and Commission have been complied above is true and complete to the	regulations of the with and that the best of my know	Oil Conservation	ා රික්කම් ව ව ලි: _ ල ව ව ව ව	is four is to be f	iled in compliance with RULE 1104. or allowable for a newly drilled or deeps
I hereby certify that the rules and Commission have been complied above is true and complete to the structure of the structur	regulations of the with and that the le best of my know	Oil Conservation	APPROVED TO A PROPERTY OF THE	is fair is to be find form must be a sken on the well.	alled in compliance with RULE 1104. or allowable for a newly drilled or deepe companied by a tabulation of the deviation accordance with RULE 111. form must be filled out completely for all

MAY 1, 1970 STANTARD OR COMPANY OF TEXALLS CHAT 3 (MJ ITS CARRATING CLAME 3) CHEVRON ON COMPANY

DISTRIBUTION	NEW MEYICO OF	U CONCEDVATION COMMISSION	
SANTA FE		IL CONSERVATION COMMISSION	Form C-104
FILE		ST FOR ALLOWABLE	HUBBS DEFUCE 0.65. C.
	-	AND	0. C. C.
U.S.G.S.	AUTHORIZATION TO	AND: TRANSPORT OIL AND NATURAI	-MAS 9 2 as man
LAND OFFICE			3 16 M 28
TRANSPORTER OIL	_		
GAS	_		
OPERATOR	_		
PRORATION OFFICE			
Operator Standard Oil	Commany of Texas		
A Division of	Chevron Oil Company		
Address			
3610 Avenue S	- Snyder, Texas		
Reason(s) for filing (Check proper bo	r)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil X Dr	y Gas Effecti	ve date March 0, 1966
Change in Ownership	Casinghead Gas Co	ondensate	ve sauce reaction is a speed
shange in ownership			
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND			
Lease Name	Lease No. Well No. Poo	l Name, Including Formation	Kind of Lease
Continental State	1 S	tateline Ellenburger	State, Federal or Fee State
Location			
Unit LetterB	O Feet From The East	Line and 860 Feet Fro	om The North
Chit Letter;;	reet rom rie	Leave divi	5.11 (.10
Line of Section 5 To	ownship 24S Range	38E , NMPM, Le	a County
Eine of Section / 10	- Lib Franço	JOH , 11111 WI, 1110	<u> </u>
		~ 4.0	
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL	Aidreas (Cine address to which as	proved copy of this form is to be sent)
Name of Authorized Transporter of Oi	or Condensate	Address force address to which up	proved copy of this form is to be sent/
Shell Pipeline Corpora	tion	Box 1910, Midland	, Texas
Name of Authorized Transporter of Co	asinghead Gas or Dry Gas	Address (Give address to which ap	proved copy of this form is to be sent)
Mone			
76 - 11 2 11 14 - 14	Unit Sec. Twp. P.ge.	. Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.	B 1 5 248 3	EE To	
			077 157
	ith that from any other lease or po	ool, give commingling order number:	CT3-151
COMPLETION DATA	Oil Well Gas We	Il New Well Workover Deepen	
Designate Type of Completi			Plug Back Same Resty, Diff, Resty
		t , , , , , , , , , , , , , , , , , , ,	Plug Back Same Res'v. Diff. Res'v
Date Spudded			,
	Date Compl. Ready to Prod.	Total Depth	Plug Back Same Res'v. Diff. Res'v.
	Date Compl. Ready to Prod.		P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)		Total Depth Top Cil/Gas Pay	Plug Back Same Restv. Diff. Restv. P.B.T.D. Tubing Depth
	Date Compl. Ready to Prod.		P.B.T.D.
	Date Compl. Ready to Prod.		P.B.T.D.
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Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod. Name of Producing Formation	Top Cii/Gas Pay	P.B.T.D. Tubing Depth
Elevations (DF, RKB, RT, GR, etc., Perforations	Date Compl. Ready to Prod. Name of Producing Formation. TUBING, CASING,	Top Cil/Gas Pay AND CEMENTING RECORD	P.B.T.D. Tubing Depth Depth Casing Shoe
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Elevations (DF, RKB, RT, GR, etc., Perforations HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Fun To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, CASING & TUBING SIZE FOR ALLOWABLE (Test must able for the label of the label) Tubing Pressure Cil-Bbls. Length of Test	Top Cii/Gas Pay AND CEMENTING RECORD DEPTH SET be after recovery of total volume of load is depth or be for full 24 hours) Producing Method (Flow, pump, ga Casing Pressure Water-Bbls. Bbls. Cendensate/MMCF	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top allows lift. etc.) Choke Size Gas-MCF Gravity of Condensate
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Elevations (DF, RKB, RT, GR, etc., Perforations HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, CASING & TUBING SIZE FOR ALLOWABLE (Test must able for the label of the label) Tubing Pressure Cil-Bbls. Length of Test	Top Cii/Gas Pay AND CEMENTING RECORD DEPTH SET be after recovery of total volume of load is depth or be for full 24 hours) Producing Method (Flow, pump, ga Casing Pressure Water-Bbls. Bbls. Cendensate/MMCF	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top allows lift. etc.) Choke Size Gas-MCF Gravity of Condensate
Elevations (DF, RKB, RT, GR, etc., Perforations HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Fun To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, CASING & TUBING SIZE FOR ALLOWABLE (Test must able for the labely	Top Cil/Gas Pay AND CEMENTING RECORD DEPTH SET be after recovery of total volume of load is depth or be for full 24 hours) Producing Method (Flow, pump, ga Casing Pressure Water-Bbls. Bbls. Cendensate/MMCF Casing Pressure	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top allo s lift. etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size
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Perforations HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Bun To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, CASING & TUBING SIZE FOR ALLOWABLE (Test must able for the label of Test) Tubing Pressure Cil-Bbls. Length of Test Tubing Pressure	Top Cii/Gas Pay AND CEMENTING RECORD DEPTH SET be after recovery of total volume of load is depth or be for full 24 hours) Producing Method (Flow, pump, ga Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure OIL CONSER	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top allows lift. etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

District Engineer (Title)

(Date)

March 8, 1966

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.

BY-