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ENERGY AND MI	NERA	LS D	EPAF
	L		
DISTRIBUTION			\neg
BANTA PE			
PILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	UAS		
OPERATOR			
PRORATION OFFICE			\Box
I.			
Operator			
CHEVRON	U.S	Α.	IN
Address			
P. O. Bo	0x_6	70,	Но
Reason(s) for to	ling (C	heck	prop

OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-01-78 Format 06-01-83

U.S.G.S.	SANTA FE, NEV	V MEXICO 87501		
LAND OFFICE				•
TRANSPORTER OIL				12.9
UAS	REQUEST FOR	R ALLOWABLE	·	
OPERATOR	_ A	ND	r valenti i seri	
PROMATION OFFICE	AUTHORIZATION TO TRANSI	PORT OIL AND NATE	IRAL GAS	2017
1.				
Operator				
CHEVRON U.S.A.	TNC			, s. s. 1777 s. 11 2
Address	1,40.			
1				3 to 344
P. O. Box 670.				
Reason(s) for tiling (Check	proper dox)	Other (Pleas	e explain)	
New Well	Change in Transporter of:	Namo (Thomas Effortive 7 1 95	2
Recompletion	CII Dr	y Gas	Change Effective 7-1-85	
X Change in Ownership	Casinghead Gas Co	andensate		
.If change of ownership giv	tename discould be a	(70		
and address of previous or		ox 6/0, Hobbs,	NM 88240	
II. DESCRIPTION OF W	VELL AND LEASE			. 3
Lease Name	Weil No. Pool Name, Including Fo	ormation	Kind of Lease	Lease No.
manda "h"	Lite 1 Shirter		State, Federal or Fee _ 1 11 11	
Location	maci C I trumbing.			J
Unit Letter : 430 Feet From The Worth Line and 1980 Feet From The West				
	,	_	(0	en de la companya de La companya de la co
Line of Section 38 Township 335 Range 37E, NMPM, Sea, County			County	
<u> </u>				
WE DESIGNATION OF	TRANSPORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transpo	or Condensate		to which approved copy of this form is to	o be senti
Rame of Adinorities to the first to the firs				
detty free	ding & Transportation	DON 1142.	Midland Sy	19101
Name of Authorized Transpo	mer of Galagnead Gas Ser Dry Gas	Address/(Give address	to which approved copy of this form is in	o be sentj
SEYACO PLIO	ucina Inc.	Del 3000.	Julsa of 1410 a	
If well produces off or liquid	Unn Sec. Twp. Rge.	Is gay actually connect	ed? When	
give location ofwarks.	1 C 38 1225 37F	Mess	1 1-20-77	7
<u> </u>	- DI DI DA DIE	- 1500 -	0 2 2 2 2	
If this production is commi	ingled with that from any other lease or pool,	give commingling orde	r number: <u> </u>	
NOTE: Complete Prets	IV and V on reverse side if necessary.	•		
NOIL. Complete Finis	IV und V on reverse side if necessary.	••		
III CERTIFICATE OF C	ONDITANCE	ם ווס	ONSERVATION DIVISION	
VI. CERTIFICATE OF CO	JMPHANCE		STATE TOWN	
I hereby corrify that the other as	nd regulations of the Oil Conservation Division have	APPROVED	11AN 7 3 1000	
been complied with and that the information given is true and complete to the best of				
my knowledge and belief.	9	BY PAR	us 1/1/ /20	i i
,		1 //	Digral and a com-	
_	.	TITLE	DISTRICT 1 SUPERVISOR	
\bigcirc	\bigcirc : \square			
(Y(I))	W +-	This form is to	be filed in compliance with RULE	1104.

R.D.	Pite		
(Signature)			
1	Engineer		

(Title) 5-31-85

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.