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JUN 27 1985

O. C. D. ARTESIA, OFFICE

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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FILE			7
U.S.G.4.			
LAND OFFICE		1	
TRANSPORTER	OIL		
	GAS		,
OPERATOR			
PROMATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE
AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

GAS PENIET C	OD ALLOWARD S	
	OR ALLOWABLE	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Designation	STORY OF AND HATOKAL GAS	
_		
CHEVRON U.S.A. INC.		
P. O. Box 670, Hobbs, NM 88240	of govt and or	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	· · · · · · · · · · · · · · · · · · ·	
Recompletion CII	Name Change Effective 7-1-85	
X Change in Ownership Casinghead Gas	Condensate	
If change of ownership give name		
and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240	
II. DESCRIPTION OF WELL AND LEASE		
Lease Name Well AND LEASE	ormation King of Lease	
Atoka San Andres Unit 149 Atoka San I	A . I egan No.	
Location	TOTAL	
Unit Letter 0 : 990 Feet From The South Li	ne and 1650 Feet From The East	
Line of Section 14 Township 185 Range	26E, NMPM, Eddis	
	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA		
Name of Authorized Transporter of City or Condensate [Roll 159 12th 210 Mm 28 7+49	
Name of Authorized Transporter of Castagreed Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
there of the teem	4001 Hanterook Odana Jul 79765	
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? When	
give location of tanks. E 1/3 1/85 : 266	Us Unknown	
If this production is commingled with that from any other lease or pool,	give commingling order number:	
NOTE: Complete Parts IV and V on reverse side if necessary.	1751 LU-3	
	1	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION Cha P	
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED JUL 5 1985	
been complied with and that the information given is true and complete to the best of my knowledge and belief.	Original Signed By	
my knowledge and benest.	BY Les A. Clements	
	TITLE Supervisor District II	
$(\mathcal{V} \cap \mathcal{O})$:		
U. V. Vite	This form is to be filed in compliance with RULE 1104.	
(Signature) If this is a request for allowable for a newly drilled or deeps well, this form must be accompanied by a tabulation of the deviation of the deviat		
Area Engineer	tests taken on the well in accordance with RULE 111.	

(Title)

All sections of this form must be filled out completely for allow-able on new and recompleted walls.

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.