

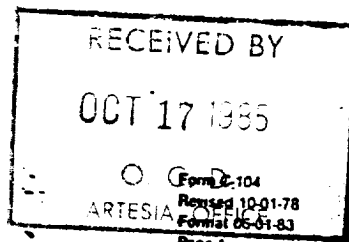
STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
CHEVRON U.S.A. INC. ☒
Address
P. O. Box 670, Hobbs, NM 88240
Reason(s) for filing (Check proper box)
☐ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain)
Name Change Effective 7-1-85
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 Eddy "IT" State Well No. 1 Pool Name, including formation Burton Flat Morrow Kind of Lease State, Federal or Fee K-64-37 Lease No.
Location Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West
Line of Section 26 Township 20S Range 27E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Permian Corp. (SH 9-1-87) Address (Give address to which approved copy of this form is to be sent) Box 3119 Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ El Paso Natural Gas Co. Address (Give address to which approved copy of this form is to be sent) Box 1492 El Paso, TX 79999
If well produces oil or liquids, give location of tanks. Unit K Sec. 26 Twp. 20S Rge. 27E Is gas actually collected? Yes When 11-1-85

If this production is commingled with that from any other lease or pool, give commingling order number: Past ID-3

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

R.D. Pite
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 28 1985

Original Signed By

BY A. Clements

TITLE Supervisor District II

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.