## STATE OF NEW MEXICO

	ENERGY AND MINERALS DEPARTMENT							
	00. 00 E0PIEG DECENTO							
	BANTA PE OIL CONSERV	ATIC						
	P. O. BO	OX 208						
	U.S.O.S. SANTA FE, NE	W ME						
•	LAND OFFICE							
	TRANSPORTER GAS REQUEST FO	n						
	CPENATOR	K ALL ND						
***	AUTHORIZATION TO TRANS							
•	1.							
	Operator							
	CHEVRON U.S.A. INC.							
	Address							
P. O. Box 599, Denver, CO 80201								
	Reason(s) for filing (Check proper box)  New Well Change in Transporter of							
		_						
		ry Gas						
	Change in Ownership Casinghead Gas C	ondensa						
	If change of ownership give name Colf Care D. O. T.							
	and address of previous owner Gulf Oil Corp., P. O. H	sox 6						
	II. DESCRIPTION OF WELL AND LEASE							
	Lease Name Well AND LEASE  Well No.   Pool Name, including F	ormation						
	Douthit "A" Federal 🗰 8 W. Kutz Pictu	red C						
	Location							
	Unit Letter C : 990 Feet From The North Lin							
	Onit Latter ; rest rrom the Lir	e and						
	Line of Section 35 Township 27N Range 1	1W						
-	•							
	III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS						
~	Name of Authorized Transporter of Cil or Condensate of State of Condensate	Addres						
:.	None	1						
	Name of Authorized Transporter of Castaghead Gas or Dry Gas 🔀	Addres						
	El Paso Natural Gas	Box						
	If well produces oil or liquids, Unit Sec. Twp. Rge.	is gas						
	give location of tanks.	<u> </u>						
111	If this production is commingled with that from any other lease or pool,	give co						
	NOTE: Complete Parts IV and V on reverse side if necessary.							
•		15						
4	VI. CERTIFICATE OF COMPLIANCE							
احد	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	APP						
	my knowledge and belief.	BY_						
Art and Chrockle								
1		TITL						
	To make	,						
_	varia	1						
•	(Signature) of Control of Signature	well,						
_	Area Engineer	,						
•	(Tale)	able						

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## ATION DIVISION OX 2088 W MEXICO 87501

R ALLOWABLE ND PORT OIL AND NATURAL GAS

				12 % 25 al Migra			
		<del></del>					
ry Gas ondensate	Name C	hange Effecti	الموركية المداركية الموركية المداركية المراكية المداركية				
Sox 670, Hobbs, NM 88240							
				5 A.			
ormation red Cli	ffs	Kind of Lease State, Federal or Fe	SF-078092				
• and	1520	Feet From The	West	The state of the s			
1W	, NMPM,	San Juan		County			

II. DESIGNATION OF TRAI	<b>NSPORTER</b>	OF OF	L AND N	IATURAL	GAS	*.	4.43	
Name of Authorized Transporter of	CII 🗀		densate [	315, 5	Address (Give address to which a	approved copy of this form	is to be sent)	
None .	<i>F</i> :			, ,,,,,,		- 40 €	1945 February 1	
Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀					Address (Give address to which approved copy of this form is to be sent)			
** Ei Paso Natural G	als ·	. 10 - 14		•• ••	Box 1492, E1 Paso, T	X 79978 ****		
f well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actually connected?	When		
ive location of tanks.	4.	1	1 1	<u> </u>	Yes	4-1-82		
this production is commissed				!	rive commingling adder another			

(Date)

OIL CONSERVATION SEVISION

APPROVED SUPERVISOR DISTRICT ##

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 filled for each pool in multiply completed weils.