

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinthead Gas  
☐ Dry 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 <u>Galmat Field Yates and</u>	Well No. <u>147</u>	Pool Name, including Formation <u>Galmat</u>	Kind of Lease <input checked="" type="radio"/> State, Federal or Fee <u>E-10239</u>	Lease No.
Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>23</u> Township <u>22S</u> Range <u>35E</u> NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas New Mexico Pipeline</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 2528, Hobbs, NM 88240</u>
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, TX 79761</u>
If well produces oil or liquids, give location of tanks. Unit <u>A</u> Sec. <u>23</u> Twp. <u>22S</u> Rge. <u>35E</u>	Is gas actually connected? <u>Yes</u> When <u>Unknown</u>

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.

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 AUG 28 1985, 19  
BY [Signature]  
TITLE DISTRICT 1 SUPERVISOR

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.

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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

JUL 29 2 47 PM '66

012117

I. Operator  
**Gulf Oil Corporation**  
Address  
**P. O. Box 670, Hobbs, New Mexico 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)  
**Change in ownership effective 8-1-66.  
Was B-A's Jalmat Field Yates Sand Unit  
Now Section 23, Well No. 41**

If change of ownership give name and address of previous owner **British-American Oil Producing Company, Box 474, Midland, Texas**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Jalmat Field Yates Sand Unit</b>	Well No. <b>147</b>	Pool Name, including Formation <b>Jalmat</b>	Kind of Lease State, Federal or Fee	State <b>B-10239</b>
Location Unit Letter <b>A</b> ; <b>660</b> Feet From The <b>north</b> line and <b>660</b> Feet From The <b>east</b> Line of Section <b>23</b> , Township <b>22S</b> Range <b>35E</b> , NMPM, <b>Lea</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Texas-New Mexico Pipe Line Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 1510, Midland, Texas</b>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Phillips Petroleum Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Phillips Building, Odessa, Texas</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>I</b>	Sec. <b>14</b>	Twp. <b>22S</b>	Rge. <b>35E</b>	Is gas actually connected? <b>Yes</b>	When <b>Unknown</b>

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

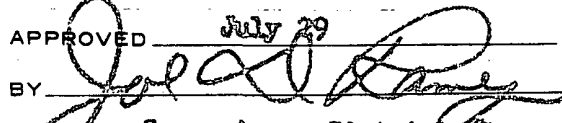
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)  
**Area Production Manager**  
(Title)

7-23-66

(Date)

OIL CONSERVATION COMMISSION

APPROVED July 29, 19 66  
BY   
TITLE **Supervisor, District #1**

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 Sections I, II, III, and VI only 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.

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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>THE BRITISH AMERICAN OIL PRODUCING COMPANY</b>				Lease <b>JALMAT FIELD YATES SAND UNIT</b>		Well No. <b>20-41</b>
Unit Letter <b>A</b>	Section <b>23</b>	Township <b>22-S</b>	Range <b>35-E</b>	County <b>LEA</b>		
Pool <b>JALMAT</b>				Kind of Lease (State, Fed, Fee) <b>SA</b>		
If well produces oil or condensate give location of tanks			Unit Letter <b>I</b>	Section <b>11</b>	Township <b>22-S</b>	Range <b>35-E</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>TEXAS-NEW MEXICO PIPE LINE COMPANY</b>				Address (give address to which approved copy of this form is to be sent) <b>P.O. BOX 1510, MIDLAND, TEXAS</b>		
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>PHILLIPS PETROLEUM COMPANY</b>			Date Connected <b>JUNE 1, 1962</b>	Address (give address to which approved copy of this form is to be sent) <b>P.O. BOX 6666, ODESSA, TEXAS</b>		

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING (please check proper box)**


New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below) **\*See Below**  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . ☐

1. Consolidation of Tank Battery.
2. Effective October 10-11-1962

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 20 day of Oct, 1962

OIL CONSERVATION COMMISSION		By
Approved by	 <b>E. E. GANDY</b> ASS'T. DIST. CLERK	Title <b>ASS'T. DIST. CLERK</b> Company <b>The British American Oil Producing Company</b> Address <b>P.O. Box 474, Midland, Texas</b>
Title		
Date	<b>OCT 24 1962</b>	