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STATE OF NEW MEXICO		•		
ENERGY AND MINERALS DEPARTME	NT			
-0. 00 100110 01111110			Form C-1	
DISTRIBUTION			Revised 1 Format Di	
SANTAPE	OIL CONSERV	ATION DIVISION	Page 1	
FILE	P. O. f	3OX 2088		•
U.S.O.A.				1.5
LAND OFFICE	SANTA FE, NE	EW MEXICO 87501		
TRANSPORTER GAS	And the second of the Property of			
OPERATOR	Z REQUEST F	OR ALLOWABLE		
PROBATION OFFICE	Andrew Consumer Consu	AND .		and the same of the same of
Y	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL (GAS	4 711
Operator				***
Operator				
CHEVRON U.S.A. INC.	•		··· ••	
Address				
P. O. Box 670, Hobbs	NM 88240			
Reason(s) for filing (Check proper bo	x)	Other (Please expla	in)	
New Well	Change in Transporter of:			
Recompletion	. —	Dry Gca Name Chang	e Effective 7-1-85	5
		J., 515		e tere to paragr
X Change in Ownership	Casinchead Gas	Condensate		
	•			
If change of ownership give name	Gulf Oil Corp., P. O.	Box 670 Hobbs NM	88270	•
and address of previous owner		DOR 570, HODDS, NM	88240	
T DECEMBER OF UTERS AS	TD 18109			
II. DESCRIPTION OF WELL AN				10 min
DA A	Well No. Pool Name, including	Formation / King of	t Lease	Legse No
Eraham State WC	FG 2 (MINICE)	MANIMONT State.	Poderal or Foo A-1542.	./
Location	0 1	- siconici per	11010	
T 193	O FROM FROM The South	1000	E +	The state of
Unit Letter : 190	Feet From The AMUCU L	ine and 780 Feet	From The Cast	Stor teg
101	100			1. égavi l
Line of Section / / To	waship /95 Range	37E , NMPM, X		
				Count
III DESIGNATION OF TRANS	DODIER OF OH AND MARKET			i grig i jêj
III. DESIGNATION OF TRANS				
	or Condensate	Agaress (Give address to which	approved copy of this form is	to be sent)
Shell Repeline	**	Show 1910 This	donad site	10119-11
Name of Authorized Transporter of Car	singhead Gas or Dry Gas	Address (Give address to which	approved cost of the form	7707
Wahham I Satte NO	1100	Ray 1-00 1 11	approved copy of this form is	to be sent)
MOUNT PROCES	2770	104 1507, Jul	M OR 741	100
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
give location of tanks.	+ J + 17 + 195 376	7 /201	Thebana	MIDA
	**************************************		- William	ω / c
I this production is commingled wil	th that from any other lease or pool,	, give commingling order numbe	r:	٠.
NOTE: Complete Parts IV and	V an annua 11 15	•		
NOIL. Complete Parts IV and I	V on reverse side if necessary.	•		
T 6555				
T. CERTIFICATE OF COMPLIAN	NCE	II OIL CONSE	AVATION DIVISION	
			9 100F	
hereby certify that the rules and regulation	ons of the Oil Conservation Division have	APPROVED AUG 2	<u> </u>	••
seen complied with and that the information	n given is true and complete to the best of		V	, 19
my knowledge and belief.		11 BY 1821	11247	

(Signalwe)

(Tille)

(Date)

Area Engineer

5-31-85

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.

DISTRICT 1 SUPERVISOR

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 auch change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.