## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	1140		
DISTRIBUTION			
SANTA PE			
FILE			
U.S.G.A.			
LAND OFFICE			
TRANSPORTER	OIL	<u> </u>	
	DAS	<u>i</u>	
OPERATOR			
PROBATION OFFICE		Γ	

## 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

TRANSPORTER DAS REQUEST FOR	
OPERATOR AND	
PROMATION OFFICE AUTHORIZATION TO TRANSPO	RT OIL AND NATURAL GAS
Operator	in the second
CHEVRON U.S.A. INC.	1 to 1 to 1
Address	
P. O. Box 670, Hobbs, NM 88240	Other (Please explain)
Reason(s) for filing (Check proper box)	7.1.05
New Well Change in Transporter of:	Name Change Effective /-1-00
Recompletion CII Dry	Gas
X Change in Ownership Casinghead Gas Cond	densate
<u>A</u>	
If change of ownership give name Gulf Oil Corp., P. O. Bo	x 670, Hobbs, NM 88240
and address of previous owner	
	en e
II. DESCRIPTION OF WELL AND LEASE	Total   Kind of Lease   Lease No.
Well No.   Pool   Fame, metallic, me	11/21/211
B. V. Celo (NCT-B)   Ecomont	ACC State, redetal of the OCC
1) Clare	The second of th
Location /	and 23/0 Feet From The East
Unit Letter : 23/0 Feet From The South Line	and October 110 Control 110 Co
- //	County
Line of Section 3/ Township 195 Range 37	E , NMPM, Lew County
Contract of the contract of th	2. port —

Name of Authorized Transporter of Caliagneed Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Caliagneed Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Caliagneed Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)

Northorn Natural Las

Bold 308 Omoria Transporter (68/0/

If well produces oil or liquids, Unit Sec. 1 Twp. Rgs. Is gas actually connected? When 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.

## 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)	

This form is to be filed in compliance with RULE 1104.

**OIL CONSERVATION DIVISION** 

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 such change of condition.

Separate Forms C-104 must be filed for each pool in multipl

JUN 25 1985