STATE OF NEW MEXICO PARTMENT

(Date)

ENERGY AND MI	NERAL	.s c	EP
80. 00 COPIGO SECTIVES		1	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.a.s.			_
LAHO OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
I.			
Operator			
CHEVRON	U.S.	. A .	T

OIL CONSERVATION DIVISION

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

FILE	P. O. B	OX 2088	, ago ,	
U.S.G.S.	SANTA FE, NE	W MEXICO 87501		
LANO OFFICE				
TRANSPORTER CIL				12 9:
OPERATOR	REQUEST FO	R ALLOWABLE		a sanda danag
PRORATION OFFICE		AND -		recorded to
1.	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL	GAS	17.51
Operator				
CHEVRON U.S.A. IN	VC.			
P. O. Box 670, Ho Reason(s) for filing (Check pro	obbs. NM 88240			4
I — ·		Other (Please expla	in/	
New Well	Change in Transporter of:	Name Chan	- P5C	
Recompletion Change in Ownership		ry Gas	ge Effective 7-1-85	
If change of ownership give rand address of previous ownership	Gulf Oil Corp., P. O.	Box 670, Hobbs, NM	88240	
II. DESCRIPTION OF WEL				
Lease Name	Well No. Pool Name, including F	ormation / Kind	of Lease	Legse No.
theodore Unde	in 3 runce M	snument State.	Federal or Fee Jack	
Location	•			
Unit Letter	WO Feet From The Kuth Lir	ne and UCC Fee	t From The East	
7	**		t From The	
Line of Section	Township 205 Range S	STE , NMPM.	Rea	
	••			County
III. DESIGNATION OF TR	ANSPORTER OF OIL AND NATURAL	GAS		twitt wi
Name of Authorized Transporter	of CII of Condensate	Address (Give address to which	h approved copy of this form is to	0.04.4504
TA			, , , , , , , , , , , , , , , , , , ,	o de seniy
Name of Authorized Transporter	of Castagnead Gas of Dry Gas	Address (Give address to was	h approved copy of this form is to	
-			- approved copy of this form is to	o de sentj
M well readware all as beautie	Unit Sec. Twp. Rge.	Is gas actually connected?) MA	· '
If well produces oil or liquids, give location of tanks.	B 17 205 37E	- 401 detadily connected?	When	
		· · · · · · · · · · · · · · · · · · ·		
If this production is commingi	ed with that from any other lease or pool,	give commingling order number	er:_	
NOTE: Complete Parts IV	and V on reverse side if necessary.			
VI. CERTIFICATE OF COM	PLIANCE	OIL CONSE	RVATION DIVISION	
I hereby certify that the rules and to been complied with and that the info	egulations of the Oil Conservation Division have permation given is true and complete to the best of	APPROVED	UG - 1 1995	19
my knowledge and belief.		BY PAREN	124 000	
		TITLE DIS	TRICT 1 SUPERVISOR	
$(Y \cap A)$). /		ed in compliance with RULE	1104
	me	If this is a request for	allowable for a succession.	
Area Eng	Signalwe) ineer	tests taken on the well in	accordance with RULE 111	the deviation
:	(Title)	All sections of this for able on new and recomplet	m must be filled out complete	ely for allow-

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.