

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
FILE	
U.S.B.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	NATURAL GAS
PROMOTION OFFICE	

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	Change in Transporter of:	☐ Oil	☐ Dry Gas
☐ Recompletion	☐ Casinghead Gas	☐ Condensate	
☒ Change in Ownership			

Other (Please explain)

If change of ownership give name and address of previous owner **Gulf Oil Corp., Box 670, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bertie Whitmire	Well No. 6	Pool Name, including Formation Monument Paddock	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter B : 990 Feet From The North Line and 2310 Feet From The East Line of Section 8 Township 20S Range 37E . NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Shell Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, OK 74100
If well produces oil or liquids, give location of tanks. Unit B Sec. 8 Twp. 20S Rge. 37E	Is gas actually connected? Yes 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

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. Pate
(Signature)
Area Engineer
(Title)
5-31-85
(Date)

OIL CONSERVATION DIVISION
APPROVED **OCT 25 1985**
BY **James L. Taylor**
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.

RECEIVED

OCT 24 1985

O.C.D.
HOBBS OFFICE