STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			П
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FILE			
U.B.G.4,			
LAND OFFICE			
TRANSPORTER	OIL		
	DAS		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

orm C-104 vised 10-01-78 ormat 06-01-83

TRANSPORTER OIL		
OPERATOR REQUEST	FOR ALLOWABLE	
PROBATION OFFICE		
I. AUTHURIZATION TO TRA	UNSPORT OIL AND NATURAL GAS	
Operator		
CHEVRON U.S.A. INC.		
Address		
P. O. Box 670, Hobbs, NM 88240		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	Name Of a RSS at a R a co	
Recompletion OII	Dry Gas Name Change Effective 7-1-85	
X Change in Ownership Casinghead Gas	Condensate	
If change of ownership give name Gulf Oil Corp., P. O. and address of previous owner	. Box 670, Hobbs, NM 88240	
II. DESCRIPTION OF WELL AND LEASE	•	
Lease Name Well No. Pool Name, includin	G Formation Kind of Lease No.	
Location Hate(MCT-6) 4 Junice 7	Monument State, Federal or Fee State " A-1543-1	
Unit Letter T : 1650 Feet From The South	991 8 4	
Unit Letter : 1621) Feet From The South	Line and Feet From The	
Line of Section /7 Township /9-5 Range	37-E, NMPM, Sea County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	LAL GAS	
Mame of Authorized Transporter at Cit or Condensate of Con	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Castaghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
Warren Petrolum Cors or a tion	c Sof 1589 Julsa Ph. 74100	
If well produces oil or liquids, Unit Sec. Twp. Rge.	Is gas actually connected? When	
give location of tanks.	El Jes : 6-20-72	
If this production is commingled with that from any other lease or pool	ol, give commingling order number:	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have APPROXED JUL 3 1 1985		
been complied with and that the information given is true and complete to the best of my knowledge and belief.	of Carlo	
my anomouge and weiter.		
TITLE DISTRICT 1 SUPERVISOR		
$(V \cap O) \cdot \mathcal{L}$	This form is to be filled in	
U. D. Vite	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
I wait, this form must be accompanied by a tabulation of the devices		
Area Engineer		
(Title) All sections of this form must be filled out completely for allow		

Fill out only Sections I. II. III, and VI for changes of owner, rell 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.