STATE OF NEW MEXICO NERGY AND MINERALS DEPART					*
. ** (**** ***********				•	Form C-104
DISTRIBUTION		201125			Revised 10-01-78 Format 06-01-83
SANTA FE	OIL CONSERVATION DIVISION			N NC	Page 1
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AND OFFICE					
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PRORATION OFFICE	AUTHORIZ	ATION TO TRA	NSPORT OIL AND NATE	IDAL CAC	
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perator					
CHEIDON II G I TIE	•				20 770 44
CHEVRON U.S.A. INC	<u> </u>				
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P. O. Box 670, Hob!	bs. NM 88240				ं शंकी विशेष
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New Well	Change in Ti	ransporter of:			in in in it.
Recompletion	CII		Name (Change Effective	e 7-1-85
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Change in Ownership	Casingh	ead Gas	Condensate		
DESCRIPTION OF WELL.	AND LEASE		Box 670, Hobbs,		
Eunie Lins	19,	Elineli	g Formation	Kind of Lease State, Federal of Fee	Legae No
Unit Letter :	660 Feet From T	. Dorth	Line and	_Feet From The	lest
Line of Section 28	Township 2/	∫ Range	37E . NUPL	. Lea	County
LDESIGNATION OF TRAI	 NSPORTER OF OIL	. AND NATUR	AL GAS	-	
ame of Authorized Transporter of	Cil or Cond	enacte []	Address (Give address	to which approved copy o	this form is to be sent?
Shell Pipeline Corp			Box 1910 Midla	nd TX 79701	يعاً عَرْبِينِهِ مِن ﴿
ame of Authorized Transporter of	Castagnead Gas	or Dry Gas	Address (Give address	to watch approved copy o	f this form is to be sent!
Warren Petr.			Box 1589 Tulsa		and the second
	Unit Sec.	Twp. Rge.	Is gas actually connect		·
well produces oil or liquids, ive location of tanks.		i up. Rige.	is das detudity eennect	ed7 When	
his production is commingled	with that from any o	ther lease or poo	ol, give commingling orde	r number:	•
	d II am amman aida	: :	•		
OTE: Complete Parts IV an	u v on reverse side	ij necessary.	•		

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.

Area Engineer

(Date)

(Title)
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 such change of condition.

Separate Forms C-104 must be filled for each pool in multiply compoleted wells.