

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	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
☐ Recompletion
☒ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinthead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 Name Change Effective 7-1-85

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Central Drinkard Unit Well No.: 127 Pool Name, including Formation: Drinkard Kind of Lease: State, Federal or Fee Lease No.:

Location
 Unit Letter: A : 460 Feet From The North Line and 6.35 Feet From The East
 Line of Section: 33 Township: 21S Range: 37E NMPM: Lea County:

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐
Shell Pipeline
 Name of Authorized Transporter of Casinthead Gas ☐ or Dry Gas ☐
Warren Petroleum
Craco Producing, Inc.
 Address (Give address to which approved copy of this form is to be sent)
Box 1910, Midland, TX 79701
 Address (Give address to which approved copy of this form is to be sent)
Box 1589, Tulsa, OK 74102
 If well produces oil or liquids, give location of tanks: Unit: A Sec.: 33 Twp.: 21S 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

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. Pate
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 20 1985
BY James A. 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

AUG 20 1985

O.C.D.
HOBBS OFFICE