ENERGY MO MINERALS DEPA				
				orm C-104 evised 10-01-78
DISTRIBUTION	OU CONSERV	ATION DIVISION		wmat 06-01-83
SANTA PE			Pa	ige 1
FILE		OX 2088		•
U.S.G.S.	SANTA FE, NE	W MEXICO 87501		
LAMO OFFICE				
TRANSPORTER GAS	The same of the sa	• • • • • • • •		
OPERATOR		OR ALLOWABLE		
PROMATION OFFICE		AND .	•	, , , , , , , , , , , , , , , , , , ,
· 1.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GA	45	
Operator				
	•			
CHEVRON U.S.A. I	NC.			•
Address				· · · · · · · · · · · · · · · · · · ·
P. O. Box 670, H	obbs. NM 88240			*** <u>*</u> *
Reason(s) for liling (Check pro	per aox j	Other (Please explain	1	
New Well	Change in Transporter of:			
Recompletion		Name Change	Effective 7-	1-85
X Change in Ownership	<b>H</b>	Condensate	•	
		anoensure		
. If change of awnership give	NAME O TO ALL -			•
and address of previous own		Box 670, Hobbs, NM	88240	•
•				
II. DESCRIPTION OF WEI	IL AND LEASE			
Lease Name	Well No.   Poor Hame, including i	Formation   Kind of	Lease	Lege
1471/1/20 1/1/14	PN / Wonker	a Malley Store F	ederal or	"
Location	The transfer of the transfer o	e sikely		
T	1000	1900	· 9	L
Unit Letter;	1980 Feet From The South	ne and <u>1980                                    </u>	From The Oas	<u> </u>
211.	015	200	1).	<u>.</u>
Line of Section 07	Township 0/2 Range	JIE , NMPM.	Ela	Co
	•			
III. DESIGNATION OF T	RANSPORTER OF OIL AND NATURA	LGAS		
Name of Authorized Fransporte	r of Cil or Condensate	Address (Give address to which	approved copy of this	form is to be sent
Moll Kinel	ino Coro	I Rail 1010 mi	dead	11/ 1000
Name of Authorized Transporte	r of Casingnead Gas or Dry Gas	Address (Give address to which	annerved convertible	$\frac{\varphi}{\sqrt{1}}$
Walley Oct	.//24.50	Bad 500 0 1		I to be sent
Marin Plus	o eucerio	1347 July	sa. 010 1	4-100
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	Whon	-
give location of tanks.	1 24 2/a:3/E	1 The	I	
If this production is comming	led with that from any other lease or pool,	give commingling order number		
	•		·	·
NOTE: Complete Parts IV	and V on reverse side if necessary.	**		
		11		•
VI. CERTIFICATE OF COM	IPLIANCE	OIL CONSER	IVATION, DIVISIO	DN .
		- A	Ub 1 3 1985	) ·
I hereby certify that the rules and i	regulations of the Oil Conservation Division have	APPROVED		, 19
been complied with and that the init my knowledge and belief.	formation given is true and complete to the best of	las ( pages,	124	
my knowledge and better.	•		- F. 1022	
	_	DIST.	RICT 1 SUPERVIS	· • • • • • • • • • • • • • • • • • • •
$\circ$	<b>^</b> : .	TITLE	20, 27, 413	JOK .
$IV \cap I$	)	This form is to be filed	in compliance	
	the	If this is a request for	Houshie for a	* RULE 1104.
	(Signature)	If this is a request for a well, this form must be acco	IMPERIED BY A FARMI	
Area Enc	·	tests taken on the well in a	ccordance with Au	erion of the devi

(Title)

(Date)

5<del>-</del>31-85

County

NC OR

y drilled or deepened ation of the deviation

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.