## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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U.B.G.A.		+	<del>                                     </del>	İ
LAKO OFFICE		1-	-	ĺ
TRANSPORTER	OIL	1	1	
- CALLER	GAS	<del></del>	1	ĺ
OPERATOR		_	_	
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## 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

TRANSPORTER OIL		
OPERATOR REQUEST	FOR ALLOWABLE	
PROMATION OFFICE	AND	
AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GAS	
Operator	्राप्तिक के किया है। जिस्सी के किया के किया के किया के किया के किया किया के किया के किया किया किया किया किया क 	
CHEIDON H. C. I. Tura		
CHEVRON U.S.A. INC.		
D 0 5		
P. O. Box 670, Hobbs, NM 88240 Reason(s) for filing (Check proper box)	- 194	
M 7 M	Other (Please explain)	
Change in Transporter of:	<u>.</u>	
	Dry Gca Name Change Effective 7-1-85	
X Change in Ownership Casinghead Gas	Condensate	
If change of ownership give name Colf Oct o		
and address of previous owner Gulf Oil Corp., P. O.	Box 670 Hobbs NW Boxes	
	BOX 070, HODDS, NM 88240	
II. DESCRIPTION OF WELL AND LEASE		
Lease Name   Well No.   Poor Name, Including	Formation   Kind of Lease	
H.T. mattern (NCT-E) 2 Conociela	State, Federal or Fee LCS Logge No.	
Location 1980	Store, redered or ree State "	
Unit Letter Post	11980	
reel from The Attended	ine and Feet From The	
Line of Section / Township 225 Bance	21 6	
1 Township & d S Range	36E, NMPM, Lea County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA		
Name of Authorized Fransporter of Cit or Condensate	AL GAS	
Shell Pipeline Corn.	Aggress (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas or Dry Gas	1004 1910 Midland 34 79701	
Narren Petr Naum	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, Unit Sec. Twp. 'Rge.	100 1089 Julian OR 14100	
give location of tanks.	Is gas actually connected? When	
I this production is an	- glo 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.		
Л. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
hereby certify that the advantage of the second	N:	
hereby certify that the rules and regulations of the Oil Conservation Division have een complied with and that the information given is true and complete to the best of	APPROVEDAUG 13 1000	
ly knowledge and belief.	1	
	TITLE DISTRICT 1 SUPERVISOR	
$(V \cap I)$ :		
1. Dite	This form is to be filed in compliance with RULE 1104.	
(Signature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulater	
Area Engineer	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
(Title)	All sections of this form much be dut .	
5-31-85	All sections of this form must be filled out completely for allowable on new and recompleted wells.	
(Date)	FUI out only a	
•		
-:	Separate Forms C-104 must be filed for sort	

Separate Forms C-104 must be filed for each pool in multiply completed wells.