## STATE OF NEW MEXICO

Area Engineer

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

(Title)

(Date)

ENERGY AND MINERALS DEPARTMENT	
. De. as copies sections	Form C-104
DISTRIBUTION	ATION DIVISION Revised 10-01-78
	Page 1
LAHO OFFICE	IW MEXICO 37501
TRANSPORTER OIL	
OPERATOR REQUEST FO	OR ALLOWABLE
FROMATION OFFICE	AND The second of the second o
L. AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
Operator	
CHEVRON U.S.A. INC.	
Address	
P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper aox)	10:
New Well Change in Transporter of:	Other (Please explain)
No.	Name Change Effective 7-1-85
	Condensate
	Superiodia
.If change of ownership give name Gulf Oil Corn P. O.	Por 670 II II
and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	
Lease Name 1. Such Jules Well No. 7001 Name, including	Formation/   King of Lease
Queen Mator Wand 5 Suine	State, Federal or Fee
Location	South 5
Unit Letter E: 1980 Feet From The West	1.10
Unit Letter : 110 Feet From The Li	ne and OOO Feet From The Mess
Line of Section 4 Township 225 Range	36E NMPM. LIA
To the state of th	seconda in Maria, Seconda in Maria
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	1 C18
Name of Authorized Transporter of Cit or Condensate	Aggress (Give address to which approved copy of this form is to be
Shell Pipeline Coip.	Boll 1910 Tridland 211 70
Name of Authorized Franspormer pt Castagread Gash, Gast Corporation	Address (Give address to which approved copy of this form is to be
Phillips) totaleum Grin, eds Corporation	4001 Pombusalo Odina 111 00
If well produces oil or liquids. Unit EFFESTIVE: Februd Post	109 gas actually connected? When
give location of tanks.	1772
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	01. 601.655
VI. CERTIFICATE OF COMPELANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED
been complied with and that the information given is true and complete to the best of	, 19.
my knowledge and belief.	BY PARLY JAY TON
	TITLE DISTRICT 1 SUPERVISOR
$O \cap O$	THE TOOP ENVISOR
$(\mathcal{X},\mathcal{Y},\mathcal{Y},\mathcal{F}_{\alpha})$	This form is to be filled in compliance with RULE 110
(Signature)	If this is a request for allowable for a newly delited
1	well, this form must be accompanied by a salary

2 1 - 4

is to be sent)

is to be sent!

LE 1104. rilled or deepened tabulation of the deviation en on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted walls.

Fill out only Sections I. II. III, end 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.