STATE OF NEW MEXICO

(Title)

(Date)

5-31-85

ENERGY AND MINERALS DEPARTMENT	
00. OF COPIES SECCINES	Form C-104 Revised 10-01-78
DISTRIBUTION OIL CONSERV.	ATION DIVISION Format 06-01-83
	OX 2088
U.S.O.S. SANTA FE, NET	W MEXICO 87501
TRANSPORTER OIL	
REQUEST FO	R ALLOWABLE
PROPATION OFFICE	ND -
I. AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS
Operator	
CHEVRON U.S.A. INC.	
Address	
P. O. Box 670, Hobbs, NM 88240	
Reason(s) for tiling (Check proper sox) Change in Transporter of:	Other (Please explain)
	Name Change Effective 7-1-85
	ondensate
If change of ownership give name Gulf Oil Corp., P. O. I	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	
Loase Name anda (NCT-F) 8 Jahnat	Sinte Federal or Fee
Location	Sauce C
Unit Letter : 660 Feet From The South Lin	se and 1980 Feet From The West
1/2	215
Line of Section 4 Township 22 Range	36 k , NMPM, Lea
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	CAS
Name of Authorized Transporter of Cil Or Condensate	Aggress (Give address to which approved copy of this form is to be
Stell Pipeline Carp.	Boy 1910, Midland 24 79
Name of Authorized Transporter of Castaghed Gas or Dry Gas	Address (Give address to which approved copy of this form is to be
Phillips terreleum	4001 Penturook Odieso JU 79
If well produces oil or liquids, Question of tanks. Unit Sec. Twp. Rge. 4 235:36E	Is gas actually connected? When The Router of
	who were to
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	OIL CANGERVATIONS SIVISION
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 P18.11 194 1022
•	TITLE DISTRICT 1 SUPERVISOR
$\mathcal{C}(\mathcal{O})$	This form is to be filed in compliance with RULE 11
U. V. Vite	If this is a request for allowable for a name delited
(Signature)	Well, this form must be accompanied by a tabulasian of
Area Engineer	tests taken on the well in accordance with RULE 111.

Lease No.

County

ULE 1104.

rilled or despensed accordance with MULE 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.