STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT	٢					
DO. OF COPICS SECTIONS					Ş.,	Form C-104 Revised 10-
MOITUBIRTEIG	OU CO	ONSERV	ATION D	IVISION	_	Format 06-0
SANTA PE	012 0		OX 2088	1 4 151014	•	Page 1
FILE	C 4 113			07504		
LAMO OFFICE	SANI	A PE, NE	W MEXICO	8/501		
OIL						
TRANSPORTER GAS	7	RECUEST FO	OR ALLOWAB	l F		• • •
OPERATOR	<u> </u>		AND	•		
PROMATION OFFICE	AUTHORIZATIO	N TO TRAN	SPORT OIL A	ND NATURAL (GAS	
<u>I.</u>						
Operator						
CHEVRON U.S.A. INC.	·					
Address						
P. O. Box 670, Hobbs.	NM _ 88240					
Reason(s) for tiling (Check proper cox)			C:	her (Please expia	in/	
New Well	Change in Transpo	orter of:	1	Nome Chara	TEE	. 7 1 05
Recompletion	On On	r	Ory Gas	Name Chang	e Filecti.	ve /-1-85
X Change in Ownership	Casinghead G	ias 🔲 (Condensate			•
	•					
.If change of ownership give name	Gulf Oil Corp	., P. O.	Box 670.	Hobbs, NM	88240	
and address of previous owner	··		,	, , , , , , , , , , , , ,	-002.0	
II. DESCRIPTION OF WELL AND	D LEASE					
Lease Name	Well No. Pool /	ime, inglusing	Cormation	King	of Lease	111
1 9 Carda (NCT-E	=) // /se	the E	111111111	State.	Føderal or Fee	State "
Location	71 7. 1 2-00	1000	mee			<u> xruce</u>
1 Hay Lavar B . 660	2 [Inth.	19	0 N		Est.
Unit Letter D : 400	Feet From The	tour !	ne and //	F • •	t From The	sasi
Line of Section 4 Town	nahio 225	Range	36 E	NI (D) (110
Line of Section 7		Hange		, NMPM,		Xew_
III DESIGNATION OF TRANSPO	OPTER OF OU AN	TO STATE OF A	1 (1)			
MI. DESIGNATION OF TRANSPORTER OF Authorized Transporter of Cit	or Congeneate			e address to whic	A approved cop	v of this form is
14000 Dinoling	Corn	_	Roll	010 40	Ala	1 71/ 1
Name of Authorized Transporter of Cast	ngned Gas i or D	ty Gas	Address (Gay	e address to water	<u> CEU H.C.</u>	
()11:01 0) 4/3-11	GPM Gas) I I I DAIL	Mapproved esp	of this form is
Phillips Telle	Unit EFFE IVE; Th		-11001	millo	M Week	20 JU
I i well produces out or inquias,	Cuit Et l'Est A L' 11	26.31.6	- 1445 actual	ly connected?	When	10.
give location of tanks.	Di4 00	x.) 16C	-! <u>40</u> /	Σ'	<u> </u>	ENUTU!
If this production is commingled with	that from any other	lease or pool	, give comming	gling order numb	er: `	
NOTE: Complete Parts IV and V	on annaca cida if a	ac.uccam		•		
NOTE: Complete Parts IV and V	on reverse size if no	etessary.				
VI. CERTIFICATE OF COMPLIAN	CE			OIL CONS	ERVATION	DIVISION
		•	 .	↑		714121014
I hereby certify that the rules and regulations of the Oil Conservation Division have			APPROV	۴°D		<u> </u>
been complied with and that the information	i given is true and comple	te to the best of	(/	1821	1/211	/
my knowledge and belief.			BY			2222
		•	TITLE_		STRICT 1 SU	PERVISOR
0						
$(Y(1)/L)^{2}$	<u></u>		This	form is to be (ii	ed in complia	nce with RUL
W. H. Val	<u></u>		If this	is a request fo	r allowable fo	
(Signary	40)		tests take	form must be ac n on the well in	companied by	a tabulation
A and a To a			11		·	~~~ RULE 11

(Title)

(Date)

5-31-85

10-01-78 06-01-83

County

completed wells.

frilled or despensed on of the deviation 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. 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