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| STATE OF NEW MEXICO | |
| ENERGY AND MINERALS DEPARTMENT | Form C-104 |
| | - Revised 10-01-78 Format 06-01-83 |
| DISTRIBUTION OIL CONSERVA | ATION DIVISION Page 1 |
| P. O. BC | DX 2088 |
| | N MEXICO 87501 |
| | i san with the second |
| | RALLOWABLE |
| | ND |
| AUTHORIZATION TO TRANS | PORT OIL AND NATURAL GAS |
| Operator | the second s |
| CHEVRON U.S.A. INC. | |
| Address | |
| P. O. Box 670, Hobbs, NM 88240 | |
| Reason(s) for filing (Check proper sox) New Well 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. 1 and address of previous owner Gulf Oil Corp., P. O. 1 | Box 670, Hobbs, NM 88240 |
| | |
| II. DESCRIPTION OF WELL AND LEASE | ormation Kind of Lease Lease No. |
| Lease Name 111 - M C Constant Weil No. Pool Name, including F | Germation Kind of Lease State, Federal of Fee July 11 |
| W.T.TTSComacte 11/ Tube | Nas) state to a final |
| Location T 1920 | 997 East |
| Unit Letter: 790_ Feet From The Articles Lin | ne and <u>9.70</u> Feet From The <u>Cast</u> |
| Line of Section 32 Township 2/5 Range | 37E, NMPM, Lea) County |
| | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA | LGAS |
| Name of Authorized Transporter of Cil er Condenscie | Assess (Give address to which approved copy of this form is to be sent) |
| Shell Fipeline (1). Name of Authorized Aransporter of Castaghead Gas or Dry Gas | Address (Give address to which approved copy of this form is to be sent) |
| Northern Naturla Gas Co. | Box 308 Omaha NB 68101 |
| Init Sec. Twp. Bas. | Is gas actually connected? When A |
| If well produces oil or liquids. give location of tanks. I 32 376 | I Then Internoun |
| If this production is comminging with that from any other lease or pool, | give commingling order number: |
| | · · · · · · · · · · · · · · · · · · · |
| NOTE: Complete Parts IV and V on reverse side if necessary. | р. — — — — — — — — — — — — — — — — — — — |
| VI. CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION |
| | APPROVED ALLG 1 3 1005 |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of | · · · · · · · · · · · · · · · · · · · |
| my knowledge and belief. | BY PARIS ANT m |
| | DISTRICT 1 SUPERVISOR |
| | |
| $(Y(1)) \downarrow f$ | This form is to be filed in compliance with RULE 1104. |
| (Signature) | If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation |
| Area Engineer | tests taken on the well in accordance with AULE 111. |
| (Tule) | All sections of this form must be filled out completely for allow able on new and recompleted wells. |
| | ··· |
| 5-31-85 | i) Fill out only Sections 1, 11, 111, and VI for changes of owner |
| 5-31-85 (Daire) | Fill out only Sections I, II, III, end VI for changes of owne well name or number, or transporter, or other such change of conditio |
| | well name or number, or transporter, or other such change of conditio Separate Forms C-104 must be filed for each pool in multip. |
| | well name or number, or transporter, or other such change of conditio |

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