STATE OF NEW MEXICO		
ENERGY AND MINERALS DEPARTMENT	Form C-104	
DISTRIBUTION	Revised 10-01-76 Format 06-01-83	
SANTA PE OIL CONSER	VALION DIVISION • Page 1	بأناني
	80 × 2088 IEW MEXICO 87501	
LAND OFFICE	A MEXICO 07501	
TRANSPORTER GAS GAS DECUECT	500 44.0 (4.0)	4
OPERATOR REQUEST	FOR ALLOWABLE AND	and Am
AUTHORIZATION TO TRA	WISPORT OIL AND NATURAL GAS	1730
L. Operator		j, 145.8
CHEVRON U.S.A. INC.	••	337.11
Address		1 1 32007 750
P. O. Box 670, Hobbs, NM 88240		ार्ग के देशके अ स् रिक्त
Reason(s) for filing (Check proper box) Change in Transporter of:	Other (Please explain)	
Recompletion Cil	Dry Gas Name Change Effective 7-1-85	
X Change in Ownership Casinghead Gas	Condensate	e in a serie de la compansión de la comp
If change of ownership give name Gulf Oil Corp., P. O. and address of previous owner	. Box 670, Hobbs, NM 88240	
II. DESCRIPTION OF WELL AND LEASE Weil No. Pool Name Including	ng Formation Kind of Lease	Lease No.
Surice moxument South 181 Eunice	Monument State, Federal or Fee "	
Location Clinit		
Unit Letter B: 660 Feet From The Mosth	Line and 1980 Feet From The East	
Line of Section 4 Township 2/5 Range	36E, NMPM. Lea	. 1
Line of Section 7 Township X/O Range	SOE, NMPM, ALW	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	RAL GAS	Sime in which
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to b	e sent)
Name of Authorized Flansporter of Castaghead Gas or Dry Gas	Bex 1190 Inideard Du 1970	2-11
WALLEN) Peth Deune	Address (Give address to which approved topy of this form is to b	e sentj
If well produces oil or liquids, Unit Sec. Twp. Rge.	Is gas actually connected? When	
give location of tanks.	et the takenous	
If this production is commingled with that from any other lease or po-	ol, give commingling order number:	
NOTE: Complete Parts IV and V on reverse side if necessary.	•	
NOTE: Complete lans IV and V on letterse side if necessary.	II	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division ha	APPROVED ALIG -2C 1000	
been complied with and that the information given is true and complete to the best	of 0 1200	
my knowledge and belief.		
	TITLE DISTRICT 1 SUPERVISOR	
$(\mathcal{V} \bigcirc \mathcal{D}) \mathcal{L}$	This form is to be filed in compliance with RULE 1	104
(Signature)	- If this is a request for allowable for a newly delited.	
Area Engineer	well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.	e deviation
(Tule)	All sections of this form must be filled out completel able on new and recompleted wells.	y for allow
5–31 –85	Fill out only Sections I. II III and VI for changes	r
(Date)	want name or number, or transporter, or other such change o	f condition.
	Separate Forms C-104 must be filed for each pool completed wells.	in multiply
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