STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	Form C-104
00. 67 (07/16 01((1)10	Revised 10-01-78
DISTRIBUTION OIL CONSERV	ATION DIVISION Page 1
	OX 2088 .
LAND OFFICE	W MEXICO 87501
TAANSPORTER OIL	
CAS I REQUEST FI	OR ALLOWABLE
	AND
AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
Operator	
CHEVRON U.S.A. INC.	
Address	
P. O. Box 670, Hobbs, NM 88240	2 -
Reason(s) for filing (Check proper aox)	Other (Please explain)
New Vell Change in Transporter of:	Name Change Effective 7-1-85
Recompletion Cil	Dry Gen
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name Gulf Oct Com- D.O.	
and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	
Lease Name (Weil No.   Pool Name, including	Part in the second course in the second seco
mace restance	State, Federal or Fee ()-2.30
E 1900 houth	$110$ $2x_{0} + \cdots$
Unit Letter ; <u>1780</u> Feet From The <u>1070/C</u>	ine and <u>lefel</u> Feet From The <u>Mest</u>
1/ 2/5	21E Day
Line of Section 4 Township 2/5 Range	Old NMPM, JUD Cour
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	I CAS
Name of Authorized Transporter of Cil or Condensate	Asaress (Give address to which approved copy of this form is to be sent)
Mell Pipeline Carp.	Boul 1910 Thidlow d. 711, 79701
Name of Authorized Fransparter of Castagneda Das or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Chillips Hetroleum	4001 fim work Odism 111, 7976
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas acjually connected? When
give location of tanks. M: 4:215:366	- Unknow
If this production is commingled with that from any other lease or pool	
	, give comminging order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
•	
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.	
	TITLE DISTRICT 1 SUPERVISOR
$\sim 0000$	
K. J. Vatre	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the devia tasta taken on the well is accompanied.
Area Engineer	I totte teken on the went in accordance with AULE 111.
	All sections of this form must be filled out completely for all able on new and recompleted wells
(Title)	able on new and recompleted wells.
(Title)	Fill out only Parties a second second
	Fill out only Sections I. II. III. and VI for changes of own well name or number, or transporter, or other such change of condu-
(Tille) 5-31-85	if well name of number, of transporter, or other such thange of condition
(Tille) 5-31-85	Fill out only Sections I. II. III, and VI for changes of owr well name or number, or transporter, or other such change of condit Separate Forms C-104 must be filed for each pool in multi completed wells.
(Tille) 5-31-85	Separate Forms C-104 must be filed for each pool in muter
(Tille) 5-31-85	Separate Forms C-104 must be filed for each pool in muter

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