

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator CHEVRON U.S.A. INC.	
Address P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☒ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Gas ☐ Condensate ☐ Casinthead Gas
Name Change Effective 7-1-85	

If change of ownership give name and address of previous owner: **Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Eunice Monument North	Well No. 212	Pool Name, including Formation Eunice Monument	Kind of Lease State, Federal or Fee	Lease No.
Location Unit I, 3300 Feet From The North Line and 660 Feet From The East				
Line of Section 5	Township 21S	Range 36E	N.M.P.M. Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Arco Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1190 Midland TX 79702
Name of Authorized Transporter of Casinthead Gas ☐ or Dry Gas ☐ Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) 4001 North Loop, Odessa, TX 79761
If well produces oil or liquids, give location of tanks.	Unit, Sec., Twp., Rge. I, 5, 21S, 36E
Is gas actually connected?	When Yes Unknown

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

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.

R.D. Pate
(Signature)

Area Engineer

(Title)

5-31-85

(Date)

OIL CONSERVATION DIVISION

AUG - 6 1985

APPROVED _____, 19

BY **James L. Taylor**

TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 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.