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| OIL CONSERVATION DIVISION | |
| P. O. BOX 2088 | Form C-103 · |
| SANTA FE, NEW MEXICO 87501 | Revised 10-1-7 |
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| HO OFFICE | State Fee |
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| M □ | 7. Unit Agreement Name |
| Operator | Eunice Monument South Un |
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| Chevron U.S.A. Inc. | Eunice Monument South Ur |
| • • | 9. Weil No. |
| P. O. Box 670, Hobbs, NM 88240 | 222 |
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| 15. Elevation (Show whether DF, RT, GR. etc.) | 12. County |
| Check Appropriate Box To Indicate Nature of Notice, Report or | Lea |
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| Elin allen for CLI | η τιτις <u>New Mexico Area Supt.</u> | 2-12-81 |
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| R Nadle | OIL & GAS INSPECTOR | D-24-87 |
| IONS OF APPROVAL, IF ANY: | | |
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STATE OF NEW MEXICO ENERGY AND MINERALS CEPARTMENT

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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL

| I. AOTHORIZATION TO TRANS | PORT OIL AND NATURAL GAS | | |
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| Cperator | | | |
| " Chevron U. S. A. Inc. | | | |
| Address | • | | |
| P. O. 670, Hobbs, New Mexico 88240 | | | |
| Reasonist for Isling (Check proper box) | Other (Please explain) | | |
| New Yell Change in Transparter of: | ***** | | |
| | Split Connection on both oil & gas | | |
| Change in Ownership X Casinghead Gas C | andenagre | | |
| If change of ownership give name and address of previous owner | • | | |
| and eduters of previous owner | | | |
| II. DESCRIPTION OF WELL AND LEASE | | | |
| Lease Name Weil No. Poal Name, including F | | | |
| Eunice Monument South Unit $ 222 $ Eunice Monume | Int. G-SA State, Federal or Fee State | | |
| Location 2300 | 1000 | | |
| Unit Latter 0:3300 Feet From The Duth Lir | e and 1980 Feet From The Gast | | |
| | 21 - | | |
| Line of Section (Township 2/) Range | 36E, NMPM, Lea County | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL | | | |
| Name of Authorized Transporter of Cit 🛕 or Condensate 📋 | Address (Give address to which approved capy of this form is to be sent) | | |
| ARCO, Shell, & Texas New Mexico Pipeline | | | |
| Name of Authorized Transparter of Casingheda Gas (or Dry Gas) | Address (Give address to which approved copy of this form is to be sent) | | |
| Texaco and Phillips Petroleum 66 Hatl Har GPM | Gas Corporation EFFECTIVE: February 1, 1992 | | |
| If well produces oil or liquids, Unit Sec. Twp. Rec. | 1s gas actually connected? When | | |
| give location of tanks. | yes unknown | | |
| If this production is commingled with that from any other lesse or pool, | give commingling order numbers | | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | • | | |
| | 11 | | |
| VI. CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION | | |
| hereby certify that the rules and regulations of the Oil Conservation Division have | APPROVED JAN 6 1007 19 | | |
| seen complied with and that the information given is true and complete to the best of my knowledge and belief. | 0 1307 | | |
| | BY ORIGINAL SIGNED BY JERRY SEXTON | | |
| | TITLE DISTRICT I SUPERVISOR | | |
| $\circ \circ $ | This form is to be filed in compliance with RULE 1104. | | |
| Oven allen los CLM | If this is a request for allowable for a newly drilled or despend | | |
| New Mexico Area Superintendent | well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | | |
| Tule) | All sections of this form must be filled out completely for allowable on new and recompleted wells. | | |
| 12-11-84 (Pate) | Fill out only Sections I II III and VI for changes of owner. | | |
| (2-11) | well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filled for each pool in multiply | | |
| į. | completed wells. | | |

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OCD HOBBS OFFICE

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

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| Chevron U.S.A. INC. | - PROBATION OFFICE | COT OIL AND MATIONAL CAR |
| CHEVRON U.S.A. INC. Address P. O. Box 670, Hobbs, NM 88240 Responsible of thing (Check proper day) Name Vail | Ī. | |
| Recontain for filing (Cheek proper car) New Well | Operator | |
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(Signature)

Area Engineer (Title)

5-31-85

(Date)

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 MULE 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.