

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUIRED	
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SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION 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 <b>Chevron U. S. A. Inc.</b>	
Address <b>P. O. 670, Hobbs, New Mexico 88240</b>	
Reason(s) for filing (Check proper box)	
<input type="checkbox"/> New Well	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
<input type="checkbox"/> Recompletion	
<input type="checkbox"/> Change in Ownership	
Other (Please explain) <b>Split Connection on both oil &amp; gas</b>	

Change of ownership give name  
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name <b>Eunice Monument South Unit</b>	Well No. <b>288</b>	Pool Name, including Formation <b>GB-SA</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Unit Letter <b>C</b>	<b>330</b>	Feet From The <b>North</b> Line and <b>2152</b> Feet From The <b>West</b>		
Line of Section <b>7</b>	Township <b>21S</b>	Range <b>36E</b>	NMPM.	Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate <b>RCO, Shell, &amp; Texas New Mexico Pipeline</b>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas or Dry Gas <b>66 Nat Gas, &amp; Texaco Prod Gas Corporation</b>	Address (Give address to which approved copy of this form is to be sent)					
Well produces oil or liquids, location of tanks.	Unit <b>I</b>	Sec. <b>7</b>	Twp. <b>21S</b>	Rge. <b>36E</b>	Is gas actually connected? <b>yes</b>	When <b>unknown</b>

If a production is commingled with that from any other lease or pool, give commingling order numbers

E: Complete Parts IV and V on reverse side if necessary.

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.

*[Signature]*  
(Signature)

New Mexico Area Superintendent

(Title)

12-12-86

(Date)

OIL CONSERVATION DIVISION

APPROVED **JAN 2 1987**, 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**  
DISTRICT I SUPERVISOR

TITLE

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.