

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

I. OPERATOR

CHEVRON U.S.A. INC.

Address
P. O. Box 670, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Other (Please explain)

☐ Recompletion ☐ Casinghead Gas ☐ Condensate

☒ Change in Ownership

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 South 3261 Pool Name, including Formation: Eunice Monument

Kind of Lease: State Federal or Fee

Lease No.:

Location: Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West

Line of Section 8 Township 21S Range 36E NMPM. Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Shell Pipeline Box 1910, Midland, TX 79701

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)

Warren Petroleum Box 1589, Tulsa, OK 74100

If well produces oil or liquids, give location of tanks. Unit K Sec 8 Twp. 21S Rge. 36E Is gas actually connected? Yes When Unknown

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

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

Area Engineer

(Title)

5-31-85

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19 _____

BY _____

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.