STATE OF NEW MEXICO	•
ENERGY AND MINERALS DEPARTMENT	Form C-104
*** ** ****** **********	Revised 10-01-78
BANTA PE OIL CONSERV	ATION DIVISION . Format 06-01-53
	OX 2088
U.S.O.S. SANTA FE, NE	W MEXICO 87501
LAND OFFICE	
TRANSPORTER OIL DEDUCT TO	9. Carlotte and the control of the c
OPERATOR KEYUESI PU	OR ALLOWABLE
TERDRATION OFFICE)	
I.	PORT OIL AND NATURAL GAS
Operator	
CHEVRON U.S.A. INC.	
Address	
P 0 P (70 W 11 NY 000/0	
P. O. Box 670, Hobbs, NM 88240 Reason(s) for filing (Check proper dox)	Other (Please explain)
New Well Change in Transporter of:	Other (Fredse espiain)
	Name Change Effective 7-1-85
	, , , , , , , , , , , , , , , , , , ,
Tir Chande in Constants	ondensate
If change of ownership give name Cult Out Commun.	
and address of previous owner Gulf Oil Corp., P. O. 1	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, Including F	
	number State, Federal or Fee ;:
Location	1000
Unit Letter N : 660 Feet From The SCUTO Lin	ne and 1980 Feet From The Most
1/ 2/0	2/5
Line of Section / / Township 2/5 Range	36E, NMPM, Lea County
	e equation ()
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to be sent)
Jelas Mell Mellico Pipeline,	Der 2528 Hollies 71 m 88240
Name of Authorized Transporter of Castagnead Gas of Dry Gas	Address (Givenaddress to which approved copy of this form is to be sent)
Phillips Fetraleum	14001 Kentucok ()dossa 24 79761
If well produces oil or liquids, Unit, Sec. Twp. Rgs.	Is gas actually connected? When /
give location of tanks. L. 16 215.366	les unknown
If this production is commingled with that from any other lease or pool,	give commingling order number
	give comminging order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
IN CERTIFICATE OF COMPLEXION	OIL CONCERVATION TO THE
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED SEF 3 1985
been complied with and that the information given is true and complete to the best of	
my knowledge and belief.	BY PAREN NON Ton
	TITLE DISTRICT 1 SUPERVISOR
	TITLE DISTRICT T SUPEXVISOR
$(Y(1)/1)^{2}$	This form is to be filed in compliance with RULE 1104.
V. J. Ville	If this is a request for allowable for a newly delited and
(Signature)	i well, this form must be accompanied by a tabulation of the dance.
Area Engineer	tests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for allow-

Separate Forms C-104 must be filed for each pool in multiply

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.

able on new and recompleted wells.

Area Engineer

(Date)