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STATE OF NEW MEXICO	•
ENERGY AND MINERALS DEPARTMENT	- Form C-104
	Revised 10-01-78 Formal 05-01-83
	ATION DIVISION Page 1
	DX 2088
- LAND OFFICE	W MEXICO 87301
TRANSPORTER OIL	and the second
	R ALLOWABLE
	PORT OIL AND NATURAL GAS
1.	
Operator	a a construction de la construcción de la construcción de la construcción de la construcción de la construcción La construcción de la construcción d
CHEVRON U.S.A. INC.	· · · · · · · · · · · · · · · · · · ·
P. O. Box 670, Hobbs, NM 88240	a second and a second
Resson(s) for filing (Check proper box)	Other (Please explain)
New Vell Change in Transporter of:	Name Change Effective 7-1-85
	NY Gan
K Change in Ownership Casinghead Gas C	Condensate
If change of ownership give name Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240
and address of previous owner Odil Oil Oil Oilp., 1. 0. /	box 070; 10003; 111 00240
I. DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Hame, including i	
Eunice monument level 384 Eunice M	ONUMER State, Federal or Fee #
"Location "list noted	660 For the Fort
, Unit Letter <u>17</u> : <u>1980</u> Feet From The <u>100</u> CC1 LL	ne and Feet From The
Line of Section 16 Township 215 Range	36E , NMPM, Kea County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	LGAS Aggress (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Cil er Condenscie	Rul 1100 Mich Pp & N. 19M1-2
Name of Authorized Tiansparier of Casioghead Gas or Dry Gas	Address (Give address, to which approved copy of this form is to be sent)
· Apillion Potroleum	4001 Perfurrole Odessan 24 7976
If well produces oil or liquide, Unit Sec. Twp. Rge.	Is gas actually connected? When 7/ 12
give location of tanks. A: 16 215 36E	
If this production is commingled with that from any other lease or pool.	give compling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	•
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED 19 19
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BY PARA ANT
	DISTRICT 1 SUPERVISOR
\sim	TITLE DISTRICT I SUPERVISOR
$(\gamma(1)) \rightarrow f$	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation
Area Engineer	tests taken on the well in accordance with RULE 111.
(Tule)	All sections of this form must be filled out completely for allow able on new and recompleted wells.
5-31-85	Fill out only Sections 1. II. III. and VI for changes of owner
(Dece)	well name or number, or transporter, or other such change of condition
	Separate Forms C-104 must be filed for each pool in multipl completed wells.
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