

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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U.S.D.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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
☐ Recompletion
☒ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 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 <i>Eunice Monument South</i>	Well No. <i>375</i>	Pool Name, including Formation <i>Eunice Monument</i>	Kind of Lease State, Federal or Free	Lease No.
Location Unit Letter <i>G</i> : <i>1980</i> Feet From The <i>North</i> Line and <i>1980</i> Feet From The <i>East</i>				
Line of Section <i>18</i> Township <i>21S</i> Range <i>36E</i> NMPM, <i>Lea</i> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ <i>Shell Pipeline</i>	Address (Give address to which approved copy of this form is to be sent) <i>Box 1910, Midland TX 79701</i>	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ <i>Harren Petroleum</i>	Address (Give address to which approved copy of this form is to be sent) <i>Box 1589, Tulsa, OK 74100</i>	
If well produces oil or liquids, give location of tanks. Unit <i>K</i> Sec. <i>18</i> Twp. <i>21S</i> Rge. <i>36E</i>	Is gas actually connected? <i>Yes</i>	When <i>Unknown</i>

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

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. Pite
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

AUG 29 1985

APPROVED
BY *J. Allen Taylor*
DISTRICT 1 SUPERVISOR

This form is to be filled in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filled for each pool in multi-completed wells.

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AUG 29 1985

OFFICE