STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT		
DISTRIBUTION SANTA PE PILE P. O	Form C-104 Revised 10-01-78 FOrmat 06-01-83 Page 1 NEW MEXICO 87501	-
TRANSPORTER UAS	FOR ALLOWABLE	9
I. AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL GAS	
CHEVRON U.S.A. INC.		· ·
P. O. Box 670, Hobbs, NM 88240 Reason(s) for filing (Check proper aox)		 -
New Well Change in Transporter of: Percompletion Cil Casinghead Gas	Other (Please explain) Name Change Effective 7-1-85 Condensate	
If change of ownership give name Gulf Oil Corp., P. O.	. Box 670, Hobbs, NM 88240	
II. DESCRIPTION OF WELL AND LEASE Ligare Name Well No. Pool Name, including Location Location	Grormation Kind of Lease Lease N. State, Federal or Fee	0.
Unit Letter 0: 660 Feet From The South	Line and 1980 Feet From The East	
Ellective 4-1-04	36E, NMPM, Lea Count	y
Name of Authorized Transporter of Cil or Condensate Of Manne of Authorized Transporter of Colo. Name of Authorized Transporter of Casingneed Gas or Dry Gas Office of Colors of	Boy 1910, Midland Dy 79701 Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved ADY 79701	٠.
Hellips Helpelem of M. Ga. Cape If well produces oil or liquids, Unit Sec. Typ. Rgs. give location of lanks.	18 quality connected? When When	:
this production is commingled with that from any other lease or pool IOTE: Complete Parts IV and V on reverse side if necessary.	give commingling order number:	<i>i</i> ::
I. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	-
nereby certify that the rules and regulations of the Oil Conservation Division have en complied with and that the information given is true and complete to the best of a knowledge and belief.	APPROVED AUG TE THE	
	TITLE DISTRICT 1 SUPERVISOR	-
(Signature) Area Engineer (Title)	This form is to be filed in compliance with RULE 1104. 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 tests taken on the well in accordance with RULE 111. All sections of this form must be filled out and	d n

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

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.

s ₹ :

31-85

(Date)