STATE OF NEW MEXICO				
ENERCY was MINERALD DEPARTMENT		•		
ENERGY AND MINERALS DEPARTMEN	лт			Form C 101
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DISTRIBUTION	OIL CONSERV	ATION DIVISION		Format 06-01-83
SANTA PE			Ň	Page 1
V.8.G.8.		BOX 2088		•
LAND OFFICE	SANTA FE, NE	EW MEXICO 87501		
TRABUPORTER OIL				
THARIFORTER GAS				
OPERATOR	REQUEST F	OR ALLOWABLE	· · · ·	
PRORATION OFFICE		AND	· · · · ·	و المحديد محد المديد و
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Operator				
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CHEVRON U.S.A. INC.	•			- · · ·
Address				
P. O. Box 670, Hobbs.	<u>NM</u> 88240			1 2 1 2 - 1
Reason(s) for filing (Check proper box	1	Other (Please exi		
New Well	Change in Transporter of:	Omer (Fleare ex)	olainj	
Recompletion		Name Cha	nge Effective	7_1_85
		Dry Gas	age milective	/-1-0)
X Change in Ownership	Casinchead Gas	Condensate		
	-			
Change of ownership give name nd address of previous owner	Gulf Oil Corp., P. O.	Box 670 Hobbs MM	000/0	• * * ·
		ben eye, nobes, NM	88240	
. DESCRIPTION OF WELL AND	DIEASE			
Lease Name / //	Well No.   Pool Name, Including			. · · ·
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HYNOIL Ramsay NCI-	CIDIEumont		te) Federal or Fee	μ.
ocation D / //			~ /	
Unit Letter : 600	Feet From The South 1	100 and $660$	E.	.+
	- rear rom the DOULL	ine andF	eet From The $\underline{// Q}$	
Line of Section 21 Tow	mahip 21-5 Bange	36-E NMPM.	1.	s per-
	mahip 015 Range	30 L . NMPM,	Lea	Count
	*-			
II. DESIGNATION OF TRAMSP	ORTER OF OIL AND NATURA	L GAS		
Name of Authorized Transporter of Cli-	or Congensate	Asatess (Give address to wh	ich approved copy of th	is form is to be senti
hell Fibeline		Roy 1910 m	dland n	11 many
Name of Authorized Transporter of Cas	inghead Gas d or Dry Gas	Address (Give address to wh	the approved copy of the	$\Psi$ 19101
Chilling tols All	lim	Hon A. I. Lool	1 A A	is form is to be sent
<u></u>	Unit Sec. Twp. Rge.	TWI TENEROUX	Valssa	JU 19762
f well produces oil or liquids, so the location of tanks.		Is gas actually connected?	When	······································
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