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STATE OF NEW MEXICO			-
ENERGY AND MINERALS DEPARTMENT			
OD. OF COPIES SECTIONS		Form C-104	
DISTRIBUTION		Revised 10-01-7	78 -
OIL CONSERV	ATION DIVISION	Formai 06-01-8	3
	3OX 2088	Page 1	
U.S.G.A. SANTA FF NE	W MEXICO 87501	•	•
LAND OFFICE	EXICO 37301	•	
TRANSPORTER OIL			
OPERATOR REQUEST F	OR ALLOWABLE		1.1.1.1.1.1.1
	AND	رسيور فالمخترف المراكب المراكب	417 4 E
	SPORT OIL AND NATURAL GA		
Operator	SI SICT SIE AND NATURAL GA		100
			<u></u>
CHEVRON U.S.A. INC.			
Address			
P. O. Box 670, Hobbs, NM 88240			
Reason(s) for tiling (Check proper aox)			
New Well Change in Transporter of:	Other (Please explain)		
1 Bearing to the control of the cont	Name Change	Effective 7-1-85	<i>///-</i>
	Dry Gos Hame Change	rriective /-1-85	
A Change in Ownership Casinghead Gas	Condensate	•	
If change of ownership give name Coll 6 041 0			
and address of previous owner Gulf Oil Corp., P. O.	Box 670. Hobbs MM	20240	•
	Des 676, Hobbs, NA	38240	
II. DESCRIPTION OF WELL AND LEASE			
Lease Name   Well No.   Pool Name, Including	Formation		
Harry Leonard NCTC 3 arrounds			Legge No.
Location Location	State, Fo	ederal or Fee State "	
$=$ $i\hat{\theta} \hat{\nabla}_{\Lambda}$ $\hat{\Omega}$	11/2		
Unit Letter E : 1480 Feet From The State Li	ne and Feet F	rom The 1/201	
7/			
Line of Section 36 Township 2/5 Range	36E , NMPM.	200	
			County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	I GAS		. · ·
Name of Authorized ganaporter of Cil or Condensate	Andress (Give address to which a	porqued copy of this form in the	
Shell Pipiline (Insp.	Rod 1010 mi	110 0 11/ 00	2170
Name of Authorized Transporter of Castagneda Gas or Dry Gast	Address (Give gadress to watch a	cura 14 79	1701
Warren Petroloum	Ball 1500 0 1	pproved copy of this form is to b	e sentj
	1387 July	n of 14100	
	is gas actually connected?	When	
17 30 21 300		Unknow	100
If this production is commingled with that from any other lesse or pool,	give commingling order number:		
		<del></del>	
NOTE: Complete Parts IV and V on reverse side if necessary.	•		
VI. CERTIFICATE OF COMPLIANCE	01. 304.35		
VI. CERTIFICATE OF COMPLEXIVE	UIL CONSER	ATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	Language AUG	The state of the s	
been complied with and that the information given is true and complete to the best of	APPROVED	. 19	
my knowledge and belief.	BY 1821 1	124 /-	
	11	722	
•	TITLE DISTR	ICT 1 SUPERVISOR	
$(\mathcal{L}(\mathcal{L}),\mathcal{L})$	l i/		
1. V. Vate	This form is to be filed	In compliance with RULE 11	104
(Signature)			
· · ·	well, this form must be accomtests taken on the well in ac	spanied by a tabulation of the	* despensed
Area Engineer			
(Tule)	able on new and recompleted	must be filled out completely wells.	for allow-
<u>5-31-85</u>			
(Date)	well name or number, or transp	II. III, and VI for changes	of owner,
		THE PERSON OF THE PERSON OF THE PERSON AND THE PERSON OF T	
, og	completed wells.	ust be filed for each pool i	w wmitibile
•		·	