STATE OF NEW MEXICO	•	
ENERGY AND MINERALS DEPARTMENT		
- De. or corice sectings	Form C-104 Revised 10-01-78	
DISTRIBUTION OIL CONSERV	ATION DIVISION . Format 06-01-83	
I SANTA PE	OX 2088	
·	W MEXICO 87501	
LAND OFFICE		
TRANSPORTER	ger dan belgier in der	
AN OPERATOR	OR ALLOWABLE	
TO PROBATION OFFICE	AND SPORT OIL AND NATURAL GAS	
I.	SPORT OIL AND NATURAL GAS	
·· Operator	the second	
CHEVRON U.S.A. INC.	·····································	
Address	many y a see	
P. O. Box 670, Hobbs, NM 88240	ामक्रीद्वीर इन्	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	Name Change Effective 7-1-85	
	· · · · · · · · · · · · · · · · · · ·	
X Change in Ownership Castnehead Gas C	Condensate	
If change of ownership give name 0.15 0.1 0		
and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240	
W DESCRIPTION OF WITH AND INACE	and the second s	
II. DESCRIPTION OF WELL AND LEASE Lease Name	ormation Kind of Lease Lagre No.	
daran Kerrandellier 3 Klindling	State; Federal or Fee R-1734	
Location //	1000	
Unit Letter B : 660 Feet From The Marth Lin	ne and 1980 Feet From The East	
Out Certor Tom The Thomas Control	re and 1930 Feet From The Cast	
Line of Section 1/12 Township 2/5 Range 3	1E, NMPM, Lla' County	
	and the same of th	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	L GAS	
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to be sent)	
Julas 1/ew 11/4/co Pipeline	But 2528, Hollis 7171 88240	
Name of Authorized Transporter of Castaghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
Marrin Pliralim	Del 1589 Julsa OR 74/80	
If well produces oil or liquids, Unit Sec. Twp. Res.	Is gas actually connected? When I have the	
10,14 10,070	with anxious	
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.	•	
	1 2	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED	
been complied with and that the information given is true and complete to the best of		
my knowledge and belief.	BY PARES ANTON	
	TITLE DISTRICT 1 SUPERVISOR	
\mathcal{L}		
W. W. to	This form is to be filed in compliance with RULE 1104.	
(Signature) If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviation of the devia		
Area Engineer	I tonto tonon on the west to accordance with MACE 111"	
: (Title)	All sections of this form must be filled out completely for at	
F 27 05	able on new and recompleted wells.	

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

STATE OF NEW MEXICO MINERALS DEPARTMENT

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DISTRIBUTION			T
BANTA PE		T	Г
FILE		1	
U.S.G.S.			
LAHO OFFICE		1	
TRANSPORTER	OIL	Ī.,	
	GAS		
OPERATOR			
PROSATION OFFICE			
I			
Operator			

OIL CONSERVATION DIVISION

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FILE	P. O. E	3O X 2088	
U.S.G.S.	SANTA FE, NEW MEXICO 87501		
LAHO OFFICE			
TRANSPORTER OIL			
OPERATOR GAS	· 1 · 1	OR ALLOWABLE	
PROBATION OFFICE	1 - Serenanian - Series - Seri	AND	7
, <u> </u>	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS	
Operator			·
1			i de la seguiria. La seguiria de la seg
CHEVRON U.S.	A. INC.		
Youises			2 2 4
P. O. Box 670			
Reason(s) for filing (Ch.	eck proper box)	Other (Please explain)	
New Well	Change in Transporter of:	Name Change Effective 7-1-8) E
Recompletion	· · · · · · · · · · · · · · · · · · ·	Dry Gas Name Change Effective /-1-0))
X Change in Ownershi	tp Casinghead Gas	Condensate	
			
If change of ownership and address of previou		Box 670, Hobbs, NM 88240	
and address of previou	• Owner	,,	
II. DESCRIPTION OF	F WEIL AND IFASE		
Leave Name	Well No. Pool Name, Including	Formation Kind of Lease	Lease No.
Han Leen	NOTE 3 1) Pas	State, Federal or Fee	0 1720
Location/	the printer	ec State	<u> </u>
2	\mathcal{L}	· 140 \	
Unit Letter	: Lobo Feet From The Thirth L	ine and 1980 Feet From The Sant	
	11 11.0	37-8 NMPM (4)	· Line Comment
Line of Section	6 Township 6/-> Range	3/-2, NMPM, Sea	County
			e process
	OF TRANSPORTER OF OIL AND NATURA	AL GAS	
Name of Authorized Trai	naporter of Cil 💆 or Condensate	Acases (Give address to which approved copy of this form	is to be sent)
Supar-7/4	w Milico Procline Co	Det 15/0 Midland 1x	79701
Name of Authorized Tran	napprier of Casinghead Gast or Dry Gas	Address (Give address to which approved copy of this form	is to be sent)
Marsen +	Detroleum Corporatio	a Bat 1589 Julya SK	14100
If well produces oil or li	quide, Unit Sec. Twp. Rqe.	Is gas actually connected? When	
give location of tanks.	16:16:21-5:37-8	E 1/2-12-	25
If this production is co	mmingled with that from any other lease or pool	give commission order author DC - 201	
. *	·	, give Journal ting order number: PC 39/	·
NOTE: Complete Pa	arts IV and V on reverse side if necessary.	•	
		04 001000	
VI. CERTIFICATE OF	COMPLIANCE	OIL CONSERVATION DIVISION	· Set to
I hereby corrify that the mile	es and regulations of the Oil Conservation Division have	n: /) muu (1,003	
	t the information given is true and complete to the best of		_, 19 <u></u>
my knowledge and belief.	,	BY PARLY MAY TOO	ş -
		DISTRICT A CHARMAN	
	•	TITLE DISTRICT 1 SUPERVISOR	
$\sqrt{\nu}$	16).	This form is to be filled in sensitions and	
$\mathcal{L}(\mathcal{L},\mathcal{L})$! Vite	This form is to be filed in compliance with RU	
	(Signature)	If this is a request for allowable for a newly dr well, this form must be accompanied by a tabulation	illed or deepened
	To a day a second	tests taken on the well in accordance with gulf	itt.

(Title)

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

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