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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT	- Form C-104
	Revised 10-01-78 Format 06-01-83
	ATION DIVISION Page 1
P. O. BOX 2088 FILE SANTA FE, NEW MEXICO 87501	
LAND OFFICE	
TRANSPORTER OIL BALL RECUEST FO	RALLOWABLE
AND	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
Cperator	
CHEVRON U.S.A. INC.	
P. O. Box 670, Hobbs, NM 88240	- : ·
Reason(s) for filing (Check proper box)	Other (Please explain)
New Vell Change in Transporter of:   Recompletion Oll	Name Change Effective 7-1-85
	ondensate
If change of ownership give name Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240	
and address of previous owner Oull Oll Colps, 1: 0: Don die, nobel, nobe	
I. DESCRIPTION OF WELL AND LEASE	ormation [Kind of Lease Lease No. ]
name Stephenes 2 Drinkard	
Location	
Unit Letter <u>E</u> : 1980 Feet From The North Line and <u>660</u> Feet From The <u>West</u>	
Line of Section 24 Township 21-5 Range	37-E, NMPM, Lea County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this join is to be starty
Jere New Medico Pipeline Co	Box 2538 Hachto 7.74 88240
Name of Authorized Transporter of Casicghead Gas or Dry Gas	Address (Cive address to which approved copy of this form is to be sent) Box 3000. Julsa de, 74/02
Jevaco Producing, Jr.C. White Sec. Twp. Res.	Is gas actually connected? When
give location of tanks. 1- 24 215 37E	yes Unknown
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	OIL CONSERVATION DIVISION
and the second sec	APPROVED AUG-1 21985 18
been complied with and that the information given is thut and complete to the best of	BY PAREN Jey Tan
my knowledge and belief.	DISTRICT 1 SUPERVISOR
$\cap$ $\cap$ $\cap$ $\cdot$ $\cdot$	117 <u>1</u>
(XD) A to	This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or deepened
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
Area Engineer	All sections of this form must be filled out completely for allow- able on new and recompleted wells.
5-31-85	Fill out only Sections I. II. III, and VI for changes of owner.
(Date)	well name or number, or transporter, or other auch change of condition. Separate Forms C-104 must be filed for each pool in multiply
	completed wells.
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