

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator CHEVRON U.S.A. INC.	
Address P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Dry Gas <input type="checkbox"/> Castinthead Gas <input type="checkbox"/> Condensate Name Change Effective 7-1-85
If change of ownership give name and address of previous owner Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240	

II. DESCRIPTION OF WELL AND LEASE

Lease Name H.T. Mattem (N+C)	Well No. 5	Pool Name, including formation Drighard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter I : 1980 Feet From The South Line and 330 Feet From The East Line of Section 18 Township 21S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Getty Indg + Transp	Address (Give address to which approved copy of this form is to be sent) Box 1142 Midland, TX 79701					
Name of Authorized Transporter of Castinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petr.	Address (Give address to which approved copy of this form is to be sent) Box 1589 Tulsa, OK 74100					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 18	Twp. 21S	Rge. 37E	Is gas actually connected? Yes	When 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

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

R.D. Pite
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY **Charles A. Taylor**
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened 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 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 completed wells.