## "STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT	
OD. OF COPICS SECTIONS	Form C-104
DISTRIBUTION	Revised 10-01-78  Format 06-01-83
V	Page 1
r	3OX 2088
LANG OFFICE SANTA FE, NE	EW MEXICO 87501
Tour Tour	
THANSPORTER	AD ALL OWARD F
OPERATOR REQUEST P	OR ALLOWABLE
PROPATION OFFICE ALITHOPIZATION TO TO AN	AND
I. AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
Operator	
CHEVRON U.S.A. INC.	The state of the s
Address	
D 0 D 670 T 11	- Andrews
P. O. Box 670, Hobbs, NM 88240 Reason(s) for filing (Check proper box)	
	Other (Please explain)
New Well Change in Transporter of:	Name Change Effection 7.1 05
Recompletion Cil	Dry Gas Name Change Effective 7-1-85
' X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name and address of previous owner Gulf Oil Corp., P. O.	Boy 670 Hobbe NW 900/0
and address of previous owner Gull Oll Corp., P. O.	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	
Lease Name   Well No.   Pool Name, including	
	Classifa Lease
	er Glorieta State, Federal or Fee Ree "
Location	)
Unit Letter M : 2970 Feet From The South L	ine and 660 Feet From The West
Line of Section 2 Township 2/5 Range	36 E , NMPM, Lea Com
•	<u> </u>
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	I GAS
Name of Authorized Transporter of Cii X or Condensate	Address (Give address to which approved copy of this form is to be sent)
Permian (con Permian (Eff. 9 / 1/87)	Box 2110 M 1/2-1 - 70-41
Name of Authorized Transporter of Castogneed Gas X or Dry Gas	100 31/9 1110 Vana TX 19701
	Address (Give address to which approved copy of this form is to be sent)
Phillips Peliolium Co	Phillip Blda Odessa N 7970
If well produces oil or liquids. Unit Sec. Twp. Rqs.	Is gas actually connected?   When
give location of tanks.   N   2   215   368	ves ! 7-24-84
If this production is commingled with that from any other lease or pool	
the production to committing the with that from any other force of poor	, give comminging order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
	$\Delta HG = 6.1985$
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	APPROVED 1000
my knowledge and belief.	
· · · · · · · · · · · · · · · · · · ·	
	TITLE DISTRICT 1 SUPERVISOR
$\Omega \cap \Omega$	
(Y(1)/V + 1)	This form is to be filed in compliance with RULE 1104.
- With	If this is a request for allowable for a contraduction
(Signature)	well, this form must be accompanied by a tabulation of the devi

(Title)

(Date)

5<del>-</del>31-85

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. 44. F. Lease No. 

County

irilled or deepened on of the deviation

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.

JUL 30 1985