## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTI	1	T		
SANTA FE				
PILE		ī	f =	
U.S.G.S.		1	1	•
LAND OFFICE		1	1	ļ
TRANSPORTER	OIL	i		1
	GAS	i		1
OPERATOR		ī		1
PROBATION OFFICE		1	_	4

## OIL CONSERVATION DIVISION

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

PILE	P. O. 80	DX 2088		
U.S.G.S.	SANTA FE, NE	W MEXICO 87501		
LAHO OFFICE				
TRANSPORTER OIL	The second secon		11.	
GAS I	A TO REQUEST FO	R ALLOWABLE		
PERATOR		IND	ren in die alteratie auf auf St	
PROBATION OFFICE		PORT OIL AND NATURAL GAS	The second secon	
<u>I.</u>		TORT OIL ATO HATORAL GAS	(特別數學是)	
Obetatos				
CHEVRON U.S.A.	TNC .		÷	
Address	Latte			
P. O. Box 670.	<u> Hobbs. MM 88240</u>		· · · · ·	
Reason(s) for tiling (Check p		Other (Please explain)		
New Well	Change in Transporter of:	Name Character		
Recompletion	Cil Di	Name Change Effec	tive /-1-85	
X Change in Ownership	Casinghead Gas C	andens ate		
If change of ownership give	name Culf Oil Comp. D. C.	2 (70 H 11 2711		
and address of previous ow	Gulf Oil Corp., P. O. H	Box 6/0, Hobbs, NM 88240		
II. DESCRIPTION OF W				
Lease Name	Well No.   Pool Name, including F	ormation Kina of Lease	Lease No.	
alice Paddo	CR 4 Blizelyy	State, Federal of I	F•• ) #	
Location	, (1			
<u></u>	1980 North	K 21)	Z-	
Unit Letter	Lin	e and Feet From The 2		
/	Township 225 Range 3	7E NAPH KCAL	· · · · · · · · · · · · · · · · · · ·	
Line of Section	Township CXCX Range	1E, NMPM, J.Ca.	County	
	•		ren -	
III. DESIGNATION OF	TRANSPORTER OF OIL AND NATURAL	. GAS		
Name of Authorized Transpor	ter of CII or Condensate	Asagess (Give address to which approved c	opy of this form is to be sent)	
Shell Pines	ine	Kot 1910 mindland	1 24 79701	
Name of Authorized Tanapart	ter of Castodness Cas of Dry Gas	Address (Give address to watch approved c	opy of this form is to be sent!	
Was was his	TSOMUM.	Roll 1580 Julian	Ab THE IAM	
1710011777	Unit Sec. Twp. Rge.	Is gas actually connected? When	CR) 17100	
If well produces oil or liquids	1 220 376		2/2 has 2 = 3/15 This	
	10,1,000,070		Inknows	
If this production is commin	igled with that from any other lease or pool,	give commingling order number:		
NOTE: Complete Parts 1	V and V on reverse side if necessary.			
NOIL. Complete Falls 1	v and v on reverse side if necessary.			
VI CEPTIFICATE OF CO	MOLLANCE	MAN OF DIE CONCEDIVATION	I Du gorne	
<b>VI. CE</b> RTIFICATE OF CO	MPLIANCE	OIL CONSERVATION	IDIVISION	
Thereby certify that the rules and	I regulations of the Oil Conservation Division have	APPROVED AUG 2 8	1005	
been complied with and that the i	information given is true and complete to the best of	y	. 19	
my knowledge and belief.	के अन्यक्षित्रकार्य के जिल्लेष्ट्रकार्यक्षेत्रक अनुसार के कार्यक का कार्यक्रम	BY PARLA MAY	1000	
		TITLE DISTRICT 1 S	UPERVISOR	
*************************************	U. to	This form is to be filed in compl	lience with RULE 1104.	
V.0.	- Aller	If this is a request for allowable	for a newly drilled or despend	

Area Engineer

(Tille) 5-31-85

(Date)

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

RECEIVED
AUG 27 1985
HOBBE OFFICE