		•
ENERGY AND MINERALS DEPARTMENT		
	Form C-104 Revised 10-0	
SANTA PE OIL CONSERV	ATION DIVISION	-
	BOX 2088	•
LAND OFFICE	EW MEXICO 87501	
TRANSPORTER OIL		acerta fi
PROMATION OFFICE	OR ALLOWABLE	
I. AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS	33.5
Chevron U.S.A. INC.		
Address		
P. O. Box 670, Hobbs, NM 88240 Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:		
Recompletion Oil   X Change in Ownership Casinghead Gas	Dry Gan Name Change Effective 7-1-85	
If change of ownership give name Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240	a san a sa s
II. DESCRIPTION OF WELL AND LEASE		
Lease Name Well No. Pool Name, Including		Lease No.
Eaves 1 Penrose	Skelly State, Federal or Fee Fee "	· · ·
Unit Letter A : 660 Feet From The North Li	ine and Feel From The East	
Line of Section 10 Township 225 Range	37.E , NMPM, Lea	and the second second
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA		County
Nume of Authorized (remeporter of Cit ) or Condensate	Aggress (Give address to which approved copy of this form is to	he read
Name of Authorized Transporter of Castaghead Gas or Dry Gas	Boy 3/19 Midland Tr -	וחרסה
Name of Authorized Transporter of Casiaghead Gas ar Dry Gas	Address (Give address to which approved copy of this form is to	be sens;
If well produces oil or liquida. Unit Sec. Twp. Rgs.	Is gas actually connected? When	100
give location of tanks. H 10 225 37E	Ves 1 4-9-84	
f 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.	·	<u> </u>
7. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
hereby certify that the rules and regulations of the Oil Conservation Division have		
een complied with and that the information given is true and complete to the best of ny knowledge and belief.	APPROVED AUG 1 4 1985	9
y kitowicage and benet.	BY PARIA Pyton	
	TITLE DISTRICT 1 SUPERVISOR	
KORT	This form is to be filed in compliance with RULE 1	
(Signalwre)	I II This is a terminal for allowed to the	
Area Engineer	tests taken on the well in accordance with suit a test	he deviation
(Title)	All sections of this form must be filled out complete able on new and recompleted wells.	ly for allow
<u>5-31-85</u> (Date)	Fill out only Sections 1 m m	
	Separate Forms C-104 must be filed for	
·	Separate Forms C-104 must be filed for each pool completed wells.	in multiply
		2.27 1 1 1 1 1
and a second and the second of the second	• • • • • • • • • • • • • • • • • • •	

• •

. . .

· ·

RECEIVED JUL 3 0 1985 OCD HORES OFFICE