(Dote)

STATE OF NEW MEXICO			
ENERGY AND MINERALS DEPART		r	
. ** (*** **(*****			Form C-104 Revised 10-01-78
DISTRIBUTION	OU CONCED		Format 06-01-83
SANTA PE		VATION DIVISION	Page 1
PILE		BOX 2088	•
U.S.G.S.	SANTA FE, N	EW MEXICO 87501	
LAHO OFFICE			
TRANSPORTER OIL	e - e e e e e e e e e e e e e e e e e e e		
OPERATOR GAS	RECUEST	FOR ALLOWABLE	
PROBATION OFFICE		TOTAL	the state of the s
¥	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
Operator	······································		
Operator			
CHEVRON U.S.A. INC	· · · · · · · · · · · · · · · · · · ·		
Address			
P. O. Box 670, Hob	bs. NM 88240		· :
Reason(s) for filing (Check prope	r box/	Other (Please exp.	(ain)
New Well	Change in Transporter of:		·
Recompletion	Поп	Dry Gas Name Char	ige Effective 7-1-85
X Change in Ownership	Casinghead Gas	Condensate	
Change in Ownership	Casinghead Cas	Candensore	
If change of ownership give na	De		· ·
and address of previous owner.		Box 670, Hobbs, NM	88240
II. DESCRIPTION OF WELL	AND LEASE		· · ·
Lease Name	Well No. Pool Name, includin	Formation King	1 of Lease Lease
1. K Undrews	1 Klinolis	(Star	e, Pederal or Fee " B alle
Location	1 7 700 100	1	12-1461
L^-	Islam 1 had	10.2	\mathcal{L}_{i}
Unit Letter;;	600 Feet From The North	Line andFe	et From The
21	Township 225 Range	38E , NMPM.	Jan
Line of Section 200	Township AND Range	JAC. , NMPM, O	ALC Cou
	•		***
III. DESIGNATION OF TRA	INSPORTER OF OIL AND NATUR	AL GAS	
Name of Authorized Transporter o	of Cil . or Condensate .	Andreas (Give address to wh	ich approved copy of this form is to be sent)
Jelas Tlew 711.	EUCO FIDELLAC	DON 2528, Hi	Ollles 11711 88240
Name of Authorized Tanaporter o	Castagnega Cas or Dry Gas	Address (Give address to wh	ich approved copy of this form is to be sent)
Mosthesmi Mit	Tural Gas Co.	1 Dest 308 Onich	a Holy color losto.
1 John Color	Unit Sec. Twp. Rge.	Is gas actually connected?	When the start of
If well produces oil or liquids, give location of tanks.	B 32 225 31		Themono
4	100 100 100	- yes	a raciona ro
If this production is commingled	with that from any other lease or po-	ol, give commingling order num	ber:
NOTE: Complete Parte III -	and V on reverse side if necessary.		
HOLL. Complete Parts IV a	me v on reverse sine if necessary.		
VI. CERTIFICATE OF COMP	TIANCE	OIL CONS	SERVATION DIVISION
VI. CERTIFICATE OF COMP	LIMINCE		בעסר ע"ד בוות"
hereby certify that the rules and rep	gulations of the Oil Conservation Division ha	APPROVED	400 T = 1303
been complied with and that the information given is true and complete to the best of		of leaver /	, 19
my knowledge and belief		BY	Asy ton
			ISTRICT 1 SUPERVISOR
		TITLE	ISTAICE I SUPEXVISOR .
	7./	i/	and to complete the
がはくノノル	1	Inia tous is to be t	iled in compliance with RULE 1104.
	Signature)	If this is a request i	for allowable for a newly drilled or deep accompanied by a tabulation of the devi
•	-	tests taken on the well	in accordance with RULE 111.
Area Engi			form must be filled out completely for a
(Title)		able or new and second	sour mast he stried out combistely (of F

. . . .

County

rilled or deepened n 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 filled for each pool in multiply