

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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

**I. Operator**  
CHEVRON U.S.A. INC.

**Address**  
P. O. Box 670, Hobbs, NM 88240

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

**Other (Please explain)**  
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 <u>R.E. Cole (ACT-A)</u>	Well No. <u>10</u>	Pool Name, including Formation <u>Alto</u>	Kind of Lease <input checked="" type="radio"/> State <input type="radio"/> Federal or Fee <u>E-3480-1</u>	Lease No.
Location				
Unit Letter <u>E</u>	<u>2310</u>	Feet From The <u>North</u> Line and <u>990</u>	Feet From The <u>West</u>	
Line of Section <u>16</u>	Township <u>22S</u>	Range <u>37E</u>	NMPM, <u>Lea</u>	County

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>TA</u>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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 June 2, 1985, 19

BY [Signature]  
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.

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SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

5a. Indicate Type of Lease

State ☒ For ☐

5. State Oil & Gas Lease No.

E-3480-1

1. OIL ☐ GAS ☐ OTHER ☐

2. Name of Operator

Gulf Oil Corp.

3. Address of Operator

P. O. Box 670, Hobbs, NM 88240

4. Location of Well

UNIT LETTER E 2310 FEET FROM THE North LINE AND 990 FEET FROM  
THE West LINE, SECTION 16 TOWNSHIP 22S RANGE 37E N.M.P.M.

7. Unit Agreement Name

8. Farm or Lease Name

R. E. Cole (WCT-A)

9. Well No.

10

10. Field and Pool, or Wildcat

Alco

15. Elevation (Show whether DF, RT, GR, etc.)

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOBS ☐

OTHER TA ☒

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

POH w/ logs & rods. Set CIBP @ 6880' 1st CIBP 500#-OK. Circ  
hole w/ pkrs. flow. TA 3-22-84.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED R. D. Pate

TITLE AREA ENGINEER

DATE 4-5-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

APR 10 1984

CONDITIONS OF APPROVAL, IF ANY:

Expires 4/10/85