STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTI	O#	į
BANTA PE		
FILE		
U.B.G.B.		- i
LAND OFFICE		
TRANSPORTER	DIL	
	DAS	
OPERATOR		
PROBATION OF	HC X	

OIL CONSERVATION DIVISION P. O. BOX 2088

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

U.S.G.A. SANTA FE, NE	W MEXICO 87501	
LAND OFFICE		
TRANSPORTER DIL	z = 0	
OPERATOR REQUEST FO	DR ALLOWABLE	
PROPATION OFFICE	AND The state of t	
AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS	
Operator		
CHEVRON U.S.A. INC.		
P. O. Box 670, Hobbs, NM 88240		
Reason(s) for filing (Check proper cox)	Other (Please explain)	
New Well Change in Transporter of:		
Recognision Cil	Name Change Effective 7-1-85	
	andensate	
E. crands in desirable	phoensule.	
If change of ownership give name Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240	
II. DESCRIPTION OF WELL AND LEASE		
Lease Name Well No. Poor Name, including f	ormation Kind of Lease Lease No.	
Armtt-Ramsau (NCT-F) 3 Justis	Slonieta State State B-229	
Location	<u> </u>	
B 110 0 111	1000	
Unit Letter D: 660 Feet From The Abrito Lit	ne andFeet From The	
20 - 20 -		
Line of Section 36 Township 255 Range	378, NMPM, Lea County	
	. 4	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL		
Name of Authorized Transporter of Ctt of Condensate	Aggress (Give address to which approved copy of this form is to be sent)	
P. Bmian Coxo.	Low 3/19 midland OU 19701 -	
Name of Authorized Transporter of Castagheda Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
91 Paso notubal Masi Co	Gov 1492 91 Pass 211 19999	
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? When	
give location of tanks. A 36 258 378	Ves 9-11-81	
If this production is commingled with that from any other lease or pool,		
	Service Manual M	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED AND TENORS	
been complied with and that the information given is true and complete to the best of		
my knowledge and belief.	BY PARLA ANY Tona	
	TITLE DISTRICT 1 SUPERVISOR	
_	I TITLE STRICT I SUPERVISOR	

(Signature)

Area Engineer (Tille) 5-31-85

(Date)

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.