

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

Operator CHEVRON U.S.A. INC.	
Address P. O. Box 670, Hobbs, NM 88240	
Person(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate 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 Academy, 13	Well No. 13	Pool Name, including Formation Academy	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter E Feet From The North Line and 330 Feet From The East Line of Section 25 Township 25 S Range 20 E NMPM, Alameda County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> James W. Miller Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 1370, Hobbs, NM 88240	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Academy Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 1370, Hobbs, NM 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	31	25 S
		20 E
		30 E
Is gas actually connected?	When	
Yes	continuous	

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

I hereby certify that the
been complied with and
my knowledge and belief

ILLEGIBLE

have
list of

R.D. Pate
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED **406 - 5 1985**, 19
BY **James W. Miller**
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.