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P. O. BOX 2088

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

Operator CHEVRON U.S.A. INC.			
Address P. O. Box 670, Hobbs, NM 88240			
Reason(s) for filing (Check proper box) <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership </td> <td style="width: 50%; vertical-align: top;"> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate </td> </tr> </table>	<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"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	Other (Please explain) <div style="border: 1px solid black; padding: 5px; width: fit-content;">Name Change Effective 7-1-85</div>
<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"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate		

II. DESCRIPTION OF WELL AND LEASE

Lessee Name <u>J. G. Carr</u>	Well No. <u>8</u>	Pool Name, including Formation <u>Fowler Upper Yezo</u>	Kind of Lease State, Federal or Free <u>Free</u>	Lease No.
Location				
Unit Letter <u>M</u>	: <u>555</u>	Feet From The <u>South</u> Line and <u>555</u>	Feet From The <u>West</u>	
Line of Section <u>10</u>	Township <u>24S</u>	Range <u>37E</u>	, NMPM, <u>Lea</u>	County

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Pipeline				Box 2528 Hobbs, NM 88240	
Name of Authorized Transporter of Crude Oil <input type="checkbox"/> or Dry Gas <input type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Co.				Box 1492 El Paso, TX 79999	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
	M	10	24S	37E	Yes Unknown

NOTE: Complete Parts IV and V on reverse side if necessary.

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)

APPROVED AUG - 2, 1985, 19
BY *James A. [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 allowance 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.

RECEIVED

JUL 30 1985

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FEDERAL BUREAU OF INVESTIGATION