STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	Form C-104
00. 00 (10040 SECCIOCO	Revised 10-01-78 Format 05-01-83
· SANTA CE	ATION DIVISION Page 1
Pice	X 2088
	V MEXICO 87501
LAMO OFFICE	$g_{ij} = g_{ij} + g_{ij} + g_{ij}$
TRANSPORTER GAS DE REQUEST FOI	RALLOWABLE
OPERATOR	ND
AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS
- Operator	
CHENDON II S A TNC	to a grant the make
CHEVRON U.S.A. INC.	And a second
P. O. Box 670, Hobbs, NM 88240	्रसक्तेष्रीयस्य र
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	Nama Changa Effaction 7.1.95
Recompletion Coll Di	Name Change Effective 7-1-85
X Change in Ownership Casinghead Gas Ca	ondensate
.If change of ownership give name Cult Odl Corp. B. O. I	•
and address of previous owner Gulf Oil Corp., P. O. H	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	$ \pm i$
Loase Name 10 11 1   Well No. Pool Name, Including F	armation / Kind of Lease Lease No.
Lea UQ State 3 N. Fearly	Sun Undres State, Federal or Fee E-1584
Unit Letter B: 870 Feet From The Motth Lin	e and 3310 Feet From The East
Line of Section 32 Township 195 Range 3	5E, NMPM, LOW County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS
Name of Authorized Transporter of Cil or Condensate	Andreas (Give address to which approved copy of this form is to be sent)
Formian (Ob.). Permian (Eff. 9/1/87)	But 3119 Midland It 19701
Name of Authorized Transporter of Castaghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Narren Potroleum	Day 1584 Julsa, OR 74100
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? When Imbmounts
give location of lanks. D 32 1795:300	yes whenour
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	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED AUG 2 3 1985
been complied with and that the information given is true and complete to the best of	1 7
my knowledge and belief.	BY PAREN ANY TON
·	TITLE DISTRICT 1 SUPERVISOR
(X.V.P.t.	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for silowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation
Area Engineer	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

Area Engineer

5-31-85

(Title)

(Date)