	RECEIVED BY	
	JUL 17 1985	
STATE OF NEW MEXICO	Ō, Ć, D,	
ENERGY AND MINERALS DEPARTMENT	ARTESIA, OFFICE	
	SERVATION DIVISION . Format 06-01-4	1
	P. O. BOX 2088 FE, NEW MEXICO 87501	
TRANSPORTER OIL V		1.1.1
OPERATOR IV	UEST FOR ALLOWABLE	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
CHEVPON II S. A. TNC		
CHEVRON U.S.A. INC.		
P. O. Box 670. Hobbs. NM 88240 Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter a	Name Change Effective 7-1-85	
Recompletion Cil Change in Ownership Casinghead Gas	Condensate	·
If change of ownership give name Gulf Oil Corp., P	2. 0. Box 670, Hobbs, NM 88240	·
I. DESCRIPTION OF WELL AND LEASE	<u> </u>	
Lease Name Well No. Pool Marre, In		Lease No.
Location	a Drayburg State, Foderal or Foo Fel "	
Unit Letter D: 990 Feet From The Mar	the Line and 980 Feel From The West	
Line of Section 13 Township 18-5 R	lange 26-E, NMPM, Eddy	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		
Name of Authorized Transporter of Cil or Candenscie	Asacess (Give address to which approved copy of this form is to b	e sentj
Name of Authorized Transporter of Casing and Ges a or Dry Gas	Address (Give address to which approved copy of this form is to b	88210 Se sensi
- Chillips Paterleur Company	Rea. Is gas actually connected? When TX 797	62
If well produces oil or liquids,	26E CHR	2
If this production is commingied with that from any other lease	or pool, give commingling order number:	- 56
NOTE: Complete Parts IV and V on reverse side if necessa		OP
VI. CERTIFICATE OF COMPLIANCE		
I hereby certify that the rules and regulations of the Oil Conservation Divis been complied with and that the information given is true and complete to th)
my knowledge and belief.	BYMike Williams*	
	TITLEOil & Gas Inspector	
This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
tests taken on the second particular by a tabulation of the deviation		
- Area Engineer (Tule)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.	
<u>5-31-85</u> (Dece)	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 completed wells.	in multiply
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