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O. C. D. ARTESIA, OFFICE

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OPERATOR		V	
PRORATION OFF	KC IK	•	_

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

PRORATION OFFICE	FOR ALLOWABLE AND ANSPORT OIL AND NATURAL GAS	
Operator	SAT OIL AND NATURAL GAS	
CHEVRON U.S.A. INC.		
P. O. Box 670 Hobbs NM 88240		
New World	Other (Please explain)	
Change in Transporter of: Recompletion	Dry Cas Name Change Effective 7-1-85	
If change of ownership give name Gulf Oil Corp., P. O.		
II. DESCRIPTION OF WELL AND LEASE		
Edd: "H-7" Star (m) 2 10 1011	a Formation Kind of Lease Lease No. Ad MMMM State, Federal or Fee 1/3/4 #	
Unit Letter K: 1980 Feet From The Anth		
Line of Services	27-8 NUPU 6	
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	County County	
Name of Authorized Transporter of CII or Condensate	AL GAS Address (Give address to which approved copy of this form is to be sent)	
Seme of Authorized Transporter of Castaghead Cas or Dry Gas	Address (Give address to which approved copy of this form is to be sent) for By 1994	
well produces oil or liquids. Unit Sec. Twp. Rgs. ive location of tanks.	is gas actually connected? When	
this production is commingled with that from any other lease or pool,	Sive Commungling order author	
	September 20 mary 200	
CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	

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.

(Signalwe)

Area Engineer (Title)

(Daie)

Oil & 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 despened 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 auch change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.