STATE OF NEW MEXICO		
ENERGY AND MINERALS DEPARTMENT	`	
OLSTAIRUTION	Form C-104 Revised 10-01-	
SANTA PE	ATION DIVISION . Format 05-01-8	ង :
i z 	OX 2088	The state of the s
LAND OFFICE SANTA FE, NE	W MEXICO 87501	
TRANSPORTER OIL		
OPERATOR REQUEST FO	OR ALLOWABLE	
PROPATION OFFICE	AND TO THE PARTY OF THE PARTY O	कर्म असी विशेष
I. AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS	
Operator		
CHEVRON U.S.A. INC.	The state of the s	
Address		
P. O. Box 670, Hobbs, NM 88240	· 	्रमञ्जूष्टी इन्
Reason(s) for Isling (Check proper box)	Other (Please explain)	
	Name Change Effective 7-1-85	
Control of the Contro	Condensate	
If change of ownership give name Gulf Oil Corp., P. O.	Boy 670 Habba Dr. Coore	•
and address of previous owner Gull Oll Corp., P. O.	Box 6/0, Hobbs, NM 88240	
II. DESCRIPTION OF WELL AND LEASE		3 4 /
Lease Name / / / / Well No. Pool Name, including f	7.7	Lease No.
Fea UA Slike / S. G. Scharle	Molecany State. Federal or Fee LG 1631	5 F4
Unit Letter <u>J: 2080</u> Feet From The <u>South</u> List	ne and 2070 Feet From The East	17.8.4.
Line of Section 16 Township 195 Range	35E, NMPM, Lea	County
III DESIGNATION OF TRANSPORTED OF CO.		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Cit or Concensus		
Pohmian Colo, Permian (Eff. 9/1/87) Name of Authorized Trapsporter of Gasiagneda Gas or Dry Gas	But 3/19, Midland It 10	9701
Wathlen Poth aloum	Aggress (Give address to which approved copy of this form is to	be sensy
Linti See I Tue I Dec	is gas actually connected? When	9 13 3-23
give location of lanks. J 16 199 35E	Thes Unknow,	70
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.	•	
	11	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED AUG 7 1985	***
been complied with and that the information given is true and complete to the best of my knowledge and belief.	, 1	9 ———
my knowledge and ocher.	BY PARLY MAY	
	TITLE DISTRICT 1 SUPERVISOR	••
$(V \cap \Omega) \cdot \mathcal{L}$		
V. J. Ville	This form is to be filed in compliance with RULE; If this is a request for sllowable for a newly drilled well, this form must be accompanied by a tabulation	
(Signature)	well, this form must be accompanied by a tabulation of the	he deviation

(Title)

(Date)

<u>5-31-85</u>

All sections of this form must be filled out completely for allow-

Separate Forms C-104 must be filed for each pool in multiply

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.

able on new and recompleted wells.