STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT	
	Form C-104
OSTRIBUTION	Revised 10-01-78 Format 06-01-83
	ATTOM DIVISION Page 1
	OX 2088
LANG OFFICE	W MEXICO 87501
TRANSPORTER OIL	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
OPERATOR REQUEST FO	R ALLOWABLE
PROBATION OFFICE	ND The state of th
AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS
Operator	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
CHEVRON U.S.A. INC.	The second secon
Address	
P. O. Box 670, Hobbs, NM 88240	Control of the contro
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	Name Change Effective 7.1 05
	Name Change Effective 7-1-85
X Change in Ownership Casinghead Gas C	andensate
change of ownership give name Gulf Oil Corp., P. O. 1	Box 670, Hobbs, NM 88240
I. DESCRIPTION OF WELL AND LEASE	rate 1
Graham State (WCTC) 4 Gienice) The	ormation Kind of Lease No. (State) Federal or Fee NM 30.5/
Unit Letter 0: 1660 Feet From The South Lin	ne and 1980 Feet From The East
Line of Section 24 Township 195 Range 3	6E, NMPM, LOW County
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	
Name of Authorized Transporter of Cil or Condensate	BOY 1910, Midland It 7977
Name of Authorized Transporter of Casjaghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, que location of tanks. Unit Sec. Twp. Rgs.	Is gas actually connected? When The horizon
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.	
T. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED AUG 2 2 1985
cen complied with and that the information given is true and complete to the best of by knowledge and belief.	BY 18.21 19/
	TITLE DISTRICT 1 SUPERVISOR
(YDD:4	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of all
Area Engineer	The same was an accordance with MOCI III
(Title) 5_31_85	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.

5-31-85 (Daie)

RECEIVED

AUG 22 1985