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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT	
••••••••••••••••••••••••••••••••••••••	Form C-104
	Revised 10-01-78
SANTAFE	ATTON DIVISION Page 1
	IOX 2088
LANO OFFICE	EW MEXICO 87501
TAANSPORTER OIL	
	OR ALLOWABLE
OPERATOR	AND
AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
I. Operator	
CHEVRON U.S.A. INC.	
P. O. Box 670, Hobbs, NM 88240 Reoson(s) for filing (Check proper dox)	
New Well Change in Transporter of:	Other (Please explain)
	Dry Gea Name Change Effective 7-1-85
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name Gulf O the D	
and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	
	Ledae No.
J.N. Carson (NCT-A) 5 Padd	OCK State, Federal or Fee Jcc. "
1 1001	
Unit Letter : 17/14 Feet From The Reitter Li	ine and Feet From The
Line of Section 28 Township 2/5 Range	37E, NMPM, Lea County
III DESIGNATION OF TRANSPORTER OF OUT AND MATTER	n an
III. DESIGNATION OF TRANSPORTER OF O'L AND NATURA	Address (Give address to which approved copy of this form is to be sent)
14000 Pineline, Poro	Reili 1010 mining a All Marine
Name of Authorized Transporter of Gasicanead Gas or Dry Gazi	Aggress (Give address to which approved copy of this form is to be sent)
Wathow Path Alim	RAU 1509 2 Pag OB Allino Marine
If well produces oil or liquids, Unit Sec. Twp. Rge.	Is gas actually connected? when
give location of tanks.	
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 1 2 1985
been complied with and that the information given is true and complete to the best of	
my knowledge and belief.	BY PARIA ANY TATA
	TITLE DISTRICT 1 SUPERVISOR
$ O \cap O : $	TITLE DISTRICT I SUPERVISOR
$(Y(1)) \downarrow \downarrow$	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for sitements for a set of the set
· - ·	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.
Area Engineer	All sections of this form must be filled out completely a
(Tille)	able on new and recompleted wells.
5-31-85	Fill out only Sections I. II. III. end VI for changes of owner, well name or number or finance.
(Daie)	in the set in the set, of the apporter, or other such change of condition.
	Separate Forms C-104 must be filed for each pool in multiply completed wells.
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