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STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	
• • • • • • • • • • • • • • • • • • •	Form C-104
DIVERNITION	Revised 10-01-78 Format 06-01-83
SANTA PE	ATION DIVISION . Page 1
P. O. 8	IOX 2088
SANTA FE, NE	W MEXICO 87501
LANG OFFICE	
TRANSPORTER CIL	The second secon
1 PAS 1 PAS	OR ALLOWABLE
To the same of the	AND
AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
	and the second s
Operator	
CHEVRON U.S.A. INC.	and the second s
Address	
D 0 D 670 3711 371 2006	100 A
P. O. Box 670, Hobbs, NM 88240 Reason(s) for filing (Check proper box)	
الس	Other (Please explain)
New Well Change in Transporter of:	Namo Change Reference 7.1 or
Recompletion Cil Cil	Name Change Effective 7-1-85
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name Gulf Oil Corp., P. O. and address of previous owner Gulf Oil Corp., P. O.	Poy 670 H-LL- NW 00010
and address of previous owner duri off colb., F. O.	Box 6/0, Hobbs, NM 88240
W 000000000000000000000000000000000000	
II. DESCRIPTION OF WELL AND LEASE	Section 1
Lease Name Well No. Pool Name, Including	Formation Kind of Lease No.
Jamat Feld Gales Sud 124 Calmat	(State) Federal or Fee 1-229
Location Unit	
Unil Letter D: 660 Feel From The Motte L	990 Wit
Unit Letter : GOO Feet From The HOULE	ine andFeet From The
Line of Section 14 Township 225 Range	35F NAPA LDA
Line of Section 14 Township 000 Range	DE, NMPM, Ala County
THE PROPERTY OF THE PARTY OF TH	المراقب المعروب
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	L GAS
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to be sent)
\mathcal{W}	The second secon
Name of Authorized Transporter of Castagheda Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
•	- Constitution of the cons
Unit Sec. Twp. Rge.	Is gas actually connected? When
If well produces oil or liquids,	The second secon
	The same of the sa
If this production is commingled with that from any other lease or pool,	give commingling order number:
NOTE: Cambles Book IV and IV and III	
NOTE: Complete Parts IV and V on reverse side if necessary.	
	Ou content to
VI. CERTIFICATE OF COMPLIANCE	OIL CONTERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
been complied with and that the information given is true and complete to the best of	APPROVED
my knowledge and belief.	BY PASES SON
	TITLE DISTRICT 1 SUPERVISOR
17 (1) / /	This form is to be filed in compliance with RULE 1104.
M. D. Me	If this is a request for allowable for a next this
(Signature)	
Area Engineer	II THE RECOIDENCE WITH MOLE III
(Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells
5-31-85	The state of the s
	I) Fill Out Daly Sections I TV IIV and to for all
(Date)	well name or number, or transporter, or other such change of condition.

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