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

Form C-104
Revised 10-01-78
Format 06-01-83
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U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL		
GAS		
OPERATOR		
PRORATION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator

CHEVRON U.S.A. INC.

Address

P. O. Box 670, Hobbs, NM   88240

Reason(s) for filing (Check proper box)

[ ] New Well

[ ] Recompletion

[X] Change in Ownership

Change in Transporter of:

[ ] Oil

[ ] Casinghead Gas

[ ] Dry Gas

[ ] Condensate

Other (Please explain)

Name Change Effective 7-1-85

If change of ownership give name and address of previous owner ___ Gulf Oil Corp., P. O. Box 670, Hobbs, NM   88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Central Drinkard Unit	402	Drinkard	State, Federal or Fee FEE	

Location

Unit Letter N : 550 Feet From The South Line and 2295 Feet From The West

Line of Section 33 Township 21S Range 37E , NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipeline	Box 2528 Hobbs NM 88240
Name of Authorized Transporter of Casinghead Gas [✓] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum	Box 1589 Tulsa OK 74100

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	NW/4	33	21S	37E	YES	4/12/76

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

I 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.

R.D.Pitre
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

AUG 1 1985

APPROVED _____, 19____

BY _____

TITLE _____ DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened 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 such change of condition.

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