STATE OF NEW MEXICO	
	Form C-104 Revised 10-01-78
DISTRIBUTION OIL CONSEF	RVATION DIVISION Page 1
	0. 60X 2088
LAND OFFICE	NEW MEXICO 87501
	F FOR ALLOWABLE
OPERATOR	AND
AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL GAS
Operator	
CHEVRON U.S.A. INC.	
P. O. Box 670, Hobbs, NM 88240	· · · ·
Reason(s) for filing (Check proper cox)	Other (Please explain)
New Vell Change in Transporter of: Recompletion Oil	Dry Gam Name Change Effective 7-1-85
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name Gulf Gil Corp. P.	0. Box 670, Hobbs, NM 88240
and address of previous owner Guilt Oll Colp., 1.	0. Box 070, 10003, Mi 002-0
II. DESCRIPTION OF WELL AND LEASE	aing Formation / King of Lease Lease No.
	Monurkent State, Foderal or For 5-230
Location Unit	p. p .
Unit Letter	Line and Feet From The Wast
Line of Section 4 Township 21S Rang	· 36E, NMPM, LOO County
III. DESIGNATION OF TRANSPORTER OF OIL AND NAT	Address (Give address to which approved copy of this form is to be sent)
Hell Pipeline Corp.	Ball 1910, Midland 24 79701
Name of Authorized Transporter of Castaghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent) 4001 for whore Odvara IV 79761
Unit Sec., Twp. Re	Lis cas actually connected? When
give location of tanks. $ Y + \alpha - \gamma $	36E Zes Unknown
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 have be consider that the rules and regulations of the Oil Conservation Division	1 have APPROVED AUG 1 4 1985 19
been complied with and that the information given is true and complete to the b	BY PARA 124 may
my knowledge and belief.	PISTRICT 1 SUPERVISOR
(X. P. Pite	This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or despended
(Signalwa)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
Area Engineer	All sections of this form must be filled out completely for allow able on new and recompleted wells.
5-31-85	Fill out only Sections I. II. III. and VI for changes of owner.
(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
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