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ENERGY AND MINERALS DEPARTMENT	- Form C-104
Distalaution	Revised 10-01-78
	ATION DIVISION Page 1 30 X 20 8 8
U.S.D.A. SANTA FE, NE	EW MEXICO 87501
- LAND OFFICE	
	OR ALLOWABLE
	AND ISPORT OIL AND NATURAL GAS
L. Operator	
CHEVRON U.S.A. INC.	
P. 0. Box 670, Hobbs, NM 88240	4 a 2 a 4
· Reason(s) for filing (Check proper box)	Other (Please explain)
New Weij Change in Transporter of: Recompletion Oli	Dry Ges Name Change Effective 7-1-85
	Condensate
If change of ownership give name Gulf Oil Corp., P. O.	Box 670 Hobbe NM 882/0
	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE	Formation _/ Kind of Lease Lease No.
	onument State, Federal or Fee "
"Location Unit	5210 8 4
Unit Letter 0: 330 Feet From The South	ine and _3310 Feet From The East
Line of Section 9 Township 2/5 Range	36E, NMPM, Lea County
<b><u>III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA</u></b>	L GAS
Name el Authorized Transporter of Cil Condensate	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Fransporper pt Castagneed Eas or Dry Gas i	Ball 1910, Thidland St 19701
Phillips tetroleum	4001 fonly ook Odesso JU 79761:
If well produces oil or liquide, give location of lanks.	Is gas actually connected? When Unknow?
If this production is commingied with that from any other lease or pool.	
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	, 19, 19,
my knowledge and belief.	BY PARLA ANTON
•	TITLE DISTRICT 1 SUPERVISOR
RDD'+	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a line in the second
Area Engineer	tests taken on the well in accordance with RULE 111.
(Tule)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.
<u>5-31-85</u> (Date)	Fill out only Sections I. II. III, end 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 multiple
· · · · · ·	I completed wells.
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