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ENERGY AND MINERALS DEPARTMENT	
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	ATION DIVISION
	cafa >
	IOX 2088
LAND OFFICE	
TRANSPORTER OIL	
OPERATOR NEGUESI FI	OR ALLOWABLE
	SPORT OIL AND NATURAL GAS
I. Operator	
CHEVRON U.S.A. INC.	
P. O. Box 670, Hobbs, NM 88240	Sector and a sector
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
Recompletion	Dry Gea Name Change Effective 7-1-85
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name Gulf Otto T	
and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240
II. DESCRIPTION OF WELL AND LEASE Leges Name ,	Formation King of Lease
S.E. Felton 1 Eunost	Hand State, Federal of Fee
Location	
Unit Letter : 600 Feet From The Ditth 1	ine and dad Feet From The East
	3/ 7
Line of Section A Township A Bange	SEE, NMPM, Sea County
III DESIGNATION OF TRANSPORTER OF OR ANTE MATTER	1 0 4 0
UI. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	Address (Give address to which approved copy of this form is to be sent)
TANO	is to be sent
Name of Authorized Transporter of Casinghead Gas or Dry Gas	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	Address (Give address to which approved copy of this form is to be sent) Bonl, 308 Mana Malua Malua bo bo tott
Name of Autorized Transporter of Casinghead Gas at Dry Gas Autorized Transporter of Casinghead Gas at Dry Gas Autoria	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Name of Autorized Transporter of Casizaped Gas ar Dry Gas And Mothers Natural Has Co.	Address (Give address to which approved copy of this form is to be sent) Bay 308, Maka, Nelmarka 68101
Name of Autorized Transporter of Casinghead Gas ar Dry Gas And	Address (Give address to which approved copy of this form is to be sent) Ber 308, Mara Nelmarka 68701 Is gas actually connected? Ups When Unknown
Name of Autorized Transporter of Casinghead Gas ar Dry Gas And	Address (Give address to which approved copy of this form is to be sent) Ber 308, Mara Nelmarka 68701 Is gas actually connected? Ups When Unknown
Name of Autorized Transporter of Casinghead Gas ar Dry Gas And	Address (Give address to which approved copy of this form is to be sent) Bay 308, Maka Melhaska 68/01 Is gas actually connected? When Unknown give commission order number:
Name of Autorized Transporter of Casinghead Gas ar Dry Gas A MOTTALKA NATURAL Has Co If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool. NOTE: Complete Parts IV and V on reverse side if necessary.	Address (Give address to which approved copy of this farm is to be sent) Bay 308, Maka Nelhaska 68/01 Is gas actually connected? When Unknown give commission order number:
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Name of Autparized Transporter of Casinghead Gas at Dry Gas ADDATARY ALTON HAS Control of Control o	Address (Give address to which approved copy of this form is to be sent) But 308, Matta NelMaska 68 101 Is gas actually connected? When Makaow give commissing order number: OIL CONSERVATION DIVISION APPROVED 416 2 1985 BY 018.01 19 BY 018.01 19 DISTRICT 1 SUPERVISOR This form is to be filed in compliance with RULE 1104. If this is a request for silowable 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 AULE 1104.
Name of Authorized Transporter of Casinghedd Gas at Dry Gas Authorized Transporter of Casinghedd Gas at Dry Gas Authorized Mattheway Matcheway Mat	Address (Give address to which approved copy of this form is to be sent) Ball 308, Maka NelMaska 68 101 Is gas actually connected? When Makaowa give commissing order number: OIL CONSERVATION DIVISION APPROVED 416 201945, 19 BY 91821 99 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 filed out according to the file of the form file of the deviation of the deviation of the deviation of the form file of the file of the form file of the file of the form file of the form file of the file of the form file of the file of the file of the form file of the file of the file of the file of the form file of the file o
Name of Authorized Transporter of Casinghedd Gas at Dry Gas M MOTTALKA MATTAL MAS 6 If well produces oil or liquids, Unit i Sec. Twp. Rge. give location of tanks. If this production is commangled with that from any other lease or pool. NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE Thereby 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. Rea Engineer (Title) 5-31-85	Address (Give address to which approved copy of this form is to be sent) But 308, Maria NelMaska 68101 Is gas actually connected? When Markaow give commissing order number: OIL CONSERVATION DIVISION APPROVED 416 221985 BY 99824 TITLE DISTRICT 1 SUPERVISOR This form is to be filled 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 allow- able on new and recompleted wells. Fill out only Sections 1 II III and 15 for abusen
Name of Authorized Transporter of Casinghedd Gas at Dry Gas A MOTTARY MATURAL Has Co- If well produces oil or liquids, give location of tanks. If this production is commangled 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 complete with and that the information given is true and complete to the best of my knowledge and belief. Area Engineer (Title)	Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) BUL 308, MARA NelMaska 687101 Is gas actually connected? When Marka 687101 Is gas actually connected? Is form is to be filed in compliance with RULE 1104. If this is a request for silowable 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 allow- able 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
Name of Authorized Transporter of Casinghedd Gas at Dry Gas Mathematical Mathematical Gas	Address (Give address to which approved copy of this form is to be sent) Bey 308, Maka Admarka 68 101 Is gas actually connected? When When When When Willisson give commissing order number: OIL CONSERVATION DIVISION APPROVED 446 201905, 19 BY MAN May 50 TITLE DISTRICT 1 SUPERVISOR This form is to be filed in compliance with AULE 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 AULE 111. All sections of this form must be filed out completely for allowable. Fill out only Sections 1. 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 out completely for allowable.
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