STATE OF NEW MEXICO	•	
ENERGY AND MINERALS DEPARTMENT	Form C-104	
	Revised 10-01-78	
	ATION DIVISION . Format 06-01-83	
FILE P. O. BO	OX 2088	•
	W MEXICO 87501	
LAND OFFICE		
TRANSPORTER GAS GAS DEDIEST FO	R ALLOWABLE	
W. Longardon	ND	war of
BECRATION OFFICE	PORT OIL AND NATURAL GAS	17.53
<u>[].</u>		
Operator		7772-42
CHEVRON U.S.A. INC.		
Address		12 July 1
P. O. Box 670, Hobbs, NM 88240	Other (Blasses	· · ·
Reason(s) for filing (Check proper box)  New Well Change in Transporter of:	Other (Please explain)	
	Name Change Effective 7-1-85	1
	ondensate	
		<del></del>
If change of ownership give name Gulf Oil Corp., P. O. H	Box 670, Hobbs, NM 88240	
and address of previous owner Gull Oll Colp., 1. U. 1		
II. DESCRIPTION OF WELL AND LEASE		1.00
Lease Name)   Well No.   Pool Name, including F	ormation Kind of Lease	Lease No.
W.A. Kamsay (WCT-A) 21   Eumont	State, Federal or Fee Tate	·
Location	<u> </u>	(-1.6.2
Unit Letter : UC Feet From The acutitation	ne and 660 Feet From The Last	i de la company
21/ 21/	1.6	i g <del>ž</del> avate
Line of Section 34 Township (17) Range 3	6E, NMPM,	County
W. DEGICAL MICAL OF TRANSPORTED OF OR AND ALATERAL		الم السنوا
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to b	e sent)
5) 11 000 000	Red 1910 midland 211 7970	1-1-12
Name at Authorized Transporter of Castinghead Gas (S. or Dry Gas (	Address (Give address to which approved copy of this form is to b	e sent)
Warren Petroleum	Ray 1589 Julya ok 74/00	- 24 C 44 G
Manual acquires oil or liquide Unit Sec. Twp. Rge.	Is gas actually connected? When	-
give location of tanks.	les unknown	
If this production is commingled with that from any other lease or pool,		
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
·	1. A AIIG - 6 1000	• 11.2 mg
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED 15	·
been complied with and that the information given is true and complete to the best of my knowledge and belief.	By Joseph Jey ton	:
iii) knowledge and a same	5	
,	TITLE DISTRICT 1 SUPERVISOR	
$(V \cap I)$ : $\perp$	This form is to be filed in compliance with RULE 1	104.
U. J. Ville	If this is a request for allowable for a newly delited	
(Signature)	well, this form must be accompanied by a tabulation of ti tests taken on the well in accordance with RULE 111.	he deviation
Area Engineer	All sections of this form must be filled out completel	14 faa -44
(Title)	able on new and recompleted wells.	· · · · · · · · · · · · · · · · · · ·
5-31-85	Fill out only Sections I. II. III, and VI for change	e of owner,
(Date)	well name or number, or transporter, or other such change of	of condition.

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

JUN 25 1985