STATE OF NEW MEXICO				
ENERGY AND MINERALS DEPARTMENT				
				Form C-104 Revised 10-01-78
DISTRIBUTION OIL CC	NSERVATION			Format 06-01-83
FILE	P. O. BOX 2088		•	Page 1
U.S.O.S. SANT	A FE, NEW MEX	ICO 87501		
LAND OFFICE				
TRANSFORTER				1
	EQUEST FOR ALLON	WABLE	•	
AUTHORIZATION	TO TRANSPORT OF	L AND NATUR		
1. Operator				
CHEVRON U.C. L. THE				
CHEVRON U.S.A. INC.				
P O Por 670 W LL NDC COCCU				
P. O. Box 670, Hobbs, NM 88240 Resson(s) for filing (Check proper box)				· ·
New Vell Change in Transport		Other (Please e	xplainj	
Recompletion Cil	Dry Gas	Name Ch.	ange Effecti	ve 7-1-85
X Change in Ownership Casinghead Gas				
		1		
If change of ownership give name Gulf Oil Corp.,	P. 0. Box 670	Hobbe M	1 99240	
	<u> </u>	, 10005, NI	1 88240	
I. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name	. including Formation	ĸ	ind of Lease	Lease No.
I.K. Andrews 3 pre	hard	St	ate, Federal or Fee	State 8-1141.7
	7		· · · · · · · · · · · · · · · · · · ·	0 470
Unit Letter: 1980 Feet From The	utte Line and _/	9.80	Feet From The	Sact
27 225	200			<u>aure</u>
Line of Section 30 Township	Range 382	, <u>NMPM</u> ,	Jea	County
IL DESIGNATION OF TRANSPORTER OF OF				······································
II. DESIGNATION OF TRANSPORTER OF OIL AND		<u> </u>	·····	
Jelas new mexico Pinelin	Rout	5500 m	A Ch approved copy	of this form is to be sent; h h a QQ a la
The stand of the s	Gas Address (alar, r	focus,	of this form is to be sense
Warren Petroleum	Roui	1500 -	Lilan copy	of this form is to be sent j
If well produces oil or liquids, Unit / Sec. Twp.	'Age. Is gas det	lually connected?	When O	R 14100
give location of tanks. H : 32 :22-	5388)	100		· · · · · · · · · · · · · · · · · · ·
this production is commingled with that from any other les		no		consum_
		ungling order nu	mber: PC -	38
OTE: Complete Parts IV and V on reverse side if nece	rssary.			
I. CERTIFICATE OF COMPLIANCE			SERVATION D	
•				IVISION E
nereby certify that the rules and regulations of the Oil Conservation D	ivision have APPRO		AUG 1	4 1900
en complied with and that the information given is true and complete to y knowledge and belief.		PARIA	1	
	BY	1	11410	23-2 /
	TITLE	<u> </u>	DISTRICT'1 SUP	ERVISOR
$(\gamma \cap \rho)$ ·L				
U.L. Vatre	151	- tond 15 to be	tiled in compliance	With AULE 1104.
(Signolwe)				a newly drilled or deepened tabulation of the deviation
Area Engineer			- accounter at	IN NULL 111.
(Title)	All able on	sections of this new and recomp	form must be fille	d out completely for allow
5-31-85	Fui	out only Section		17 for sheet
(Doie)	11	e er nemert er	meneporter or othe	r auch change of condition
	Sepe comolece	irate Forma C-)	104 must be filed	for each pool in multiply
• •	4. coudis(6)	~ *******		

RECEVED JUL 30 1985