FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* JENIFER FRANKLYN G															Relationship of Reporting Person(s) to Issuer (Check all applicable)								
															X C	irecto	or 10%		10% O	wner			
(Last) 6001 BO	`	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/29/2010											Officer elow)	(give title		Other (below)	specify		
					4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable							
(Street)					" "	7. Il Americanent, Date di Originari neu (Montinday/ real)										Line)							
SAN RAMON CA 94583															X Form filed by One Reporting Person								
					.											Form filed by More than One Reporting Person							
(City)	(Si	ate) (Zip)														61301	11					
		Tab	le I - Non	-Deriv	ative	Se	curiti	es A	cqu	ıired, I	Disp	osed	of, oı	r Bei	neficia	ılly Ov	vnec	t					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					ar) i	2A. Deemed Execution Date, if any (Month/Day/Yea			3. Transac Code (II 8)					4 and Securi Benefi Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)		Price	Tra	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (l 8)				Exp	6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		Security			9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	te ercisable		piration ite	Title		Amount or Number of Shares								
Phantom Stock ⁽¹⁾	\$0 ⁽²⁾	11/29/2010			I		178			(1)		(1)	Comr		178	\$81.6	789	10,688 ⁽³		D			
Phantom Stock Units ⁽⁴⁾	\$0 ⁽²⁾									(4)		(4)	Comr		6,710			6,710 ⁽⁴⁾		D			

Explanation of Responses:

- 1. The shares of phantom stock issued under the Chevron Non-Employee Directors' Equity Compensation and Deferral Plan become payable in common stock upon the reporting person's termination of service.
- 2. 1-for-1
- 3. This number includes dividend equivalent accruals (93) under the Chevron Non-Employee Directors' Equity Compensation and Deferral Plan.
- 4. Phantom stock units were issued under a former plan for Texaco Directors and are payable in common stock upon the reporting person's termination of service. No new awards are issuable under the former plan and only dividend equivalent accruals are earned. This number includes dividend equivalent accruals (61).

Christopher A. Butner on behalf of Franklyn G. Jenifer

12/01/2010

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.