## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OPERATOR			
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## OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

SANTA FE, NEW MEXICO 87501 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator CHEVRON U.S.A. INC. Address 2 . 2 . 4 . . P. O. Box 599, Denver, CO 80201 Rouson(s) for filing (Check proper box) Other (Please explain) New Wall Change in Transporter of: Name Change Effective 7-1-85 OII Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240 and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. i Pool Name, Including Formation Kind of Lease Lease No. 151 Bisti Lower Gallup State, Federal or Fee Federal " West Bisti Unit Location 12,0 West -1980North 660 Feet From The Feet From The is Interior 13W San Juan 26N 35 Township Line of Section , NMPM Range County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS or Condensate Name of Authorized Transporter of Cil Address (Give address to which approved copy of this form is to be sent) NONE - WATER INJECTION WELL Name of Authorized Transporter of Castoghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) NONE - WATER INJECTION WELL-Unit When Two. Rge. is the ectually connected? If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION 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 my knowledge and belief. 4-43 SUPERVISOR DISTRICT # 3 TITLE . This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despened (Signoture) well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. <u>Area Engineer</u>

All sections of this form must be filled out completely for allowon new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner, I name or number, or transporter, or other such change of condition,

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