RECEIVED BY JUL 17 1985 STATE OF NEW MEXICO O. C. D. ENERGY AND MINERALS DEPARTMENT rm C-104 ARTESIA, OFFICE ----mand 10.01-78 ALLOND IN DISTRIEUTION OIL CONSERVATION DIVISION Bana 1 BANTA PE P. O. BOX 2088 FILE V SANTA FE, NEW MEXICO 87501 V.8.0.A LAND OFFICE 014 TRANSPORTER GA REQUEST FOR ALLOWABLE OPERATOR AND 1:5 PROBATION OFFIC AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator ----CHEVRON U.S.A. INC. Address P. O. Box 670. Hobbs. Reeson(s) for filing (Check proper box) NM 88240 Other (Please explain) New Yell \_\_\_\_ Change in Transporter of: Name Change Effective 7-1-85 OII Dry Gas Recompletion Casincheed Gas X Condensate Change in Ownership If change of ownership give name Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240 and address of previous owner. AND LEASE **II. DESCRIPTION OF WELL** Pool Name, Well No. 1 Kind of Lease Lesse No. 1... State, Federal or F Location .... Unit Letter وربر ساسط NMPM Line of Section Township Rana County **JII. DESIGNATION OF** TRANSPORTER OF OIL AND NATURAL GAS this form N'a of Cil be sentj 182 AL. Ree If well produces oul or liquida 2% give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION **VI. CERTIFICATE OF COMPLIANCE** JUL 18 1985 I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED Original Signed By been complied with and that the information given is true and complete to the best of my knowledge and belief. AAile a \**\/**:ÌI: 8Y Oil & Gas Inspector TITLE This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or deepened , this form must be accompanied by a tabulation of the deviation (Signature) tests taken on the well in accordance with AULE 111. Area Engineer All sections of this form must be filled out completely for allow-(Tila) on new and recompleted wells. 5-31-85 Fill out only Sections I. II. III, and VI for changes of owner, (Date ) well 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.