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|   | L 17 1955  |
| STATE OF NEW MEXICO<br>ENERGY AND MINERALS DEPARTMENT   | O. C. D.,  |
|   | TESIA, OFFICE Form C104  |
|   | VATION DIVISION  |
| PILE VV P.O.  | BOX 2088   |
| SANTA FE, NEW MEXICO 87501  |  |
| TRANSPORTER DIL   |  |
| OPERATOR V RECUEST FOR ALLOWABLE  |  |
| I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS   |  |
| Operator  |  |
| CHEVRON U.S.A. INC.   |  |
| P. O. Box 670, Hobbs, NM 88240<br>Recoon(s) for filing (Check proper box)   |  |
| New Well Change in Transporter of:  | Other (Please explain)   |
|   | Dry Gos Name Change Effective 7-1-85   |
| X Change in Ownership Casinghead Gas  | Condensate   |
| If change of ownership give name Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240   |  |
| I. DESCRIPTION OF WELL AND LEASE  |  |
| Lease Name A (//// Well No.   Pool Name, including Formation   King of Lease  |  |
| ttaka Sun Undreis n 114 atopa San andres State. Federal or Fee Lee #  |  |
| V i li da la  |  |
| // Feet From The DOTON  |  |
| Line of Section // Township /85 Range   | 26E NMPM, Eddy County  |
| LIL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   |  |
| Name of Authorized Transporter of Cil Group or Condensate   | Addiess (Give address to which approved copy of this form is to be sent)   |
| Ngene of Authorized Haneparter of Casinghead Cas or Dry Cas   |  |
| <u>a</u>  | Address (Give address to which approved copy of this form is to be sent)   |
| If well produces oil or liquids, Unit Sec. 'Twp. 'Rgs.  | Is gas actually connected? When 7-34-39  |
|   | Chg on   |
| If this production is commingled with that from any other lease or pool, give commingling order numbers   |  |
|   |  |
| VI. CERTIFICATE OF COMPLIANCE   | OIL CONSERVATION DIVISION  |
| hereby certify that the rules and regulations of the Oil Conservation Division hav  | APPROVED 18 1985   |
| been complied with and that the information given is true and complete to the best of any knowledge and belief.   | riginal Signed By  |
|   | Mike Windins   |
|   |  |
| - U.D. Pite   | This form is to be filed in compliance with RULE 1104.   |
| (Slensive)  | If this is a request for sllowable for a newly drilled or deepened<br>well, this form must be accompanied by a tabulation of the deviation<br>tests taken on the well in accordance with RULE 111. |
| Area Engineer<br>(Tule)   | All sections of this form must be filled out completel   |
| 5-31-85   | Fill out only Section 1 m m  |
| (Dece)  | Fill out only Sections I. II. III, and VI for changes of owner,<br>well name or number, or transporter, or other such change of condition.   |
|   | Separate Forms C-104 must be filed for each pool in multiply comoleted wells.  |
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