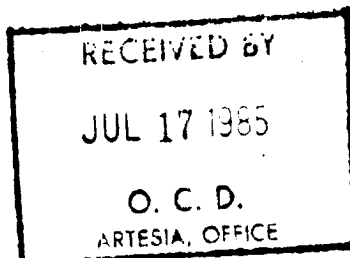


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| OPERATOR              | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE     | <input checked="" type="checkbox"/> |



OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
**CHEVRON U.S.A. INC.**

Address  
**P. O. Box 670, Hobbs, NM 88240**

Reason(s) for filing (Check proper box)

|                                                         |                                         |                                     |                                  |
|---------------------------------------------------------|-----------------------------------------|-------------------------------------|----------------------------------|
| <input type="checkbox"/> New Well                       | Change in Transporter of:               | <input type="checkbox"/> Oil        | <input type="checkbox"/> Dry Gas |
| <input type="checkbox"/> Recompletion                   | <input type="checkbox"/> Casinghead Gas | <input type="checkbox"/> Condensate |                                  |
| <input checked="" type="checkbox"/> Change in Ownership |                                         |                                     |                                  |

Other (Please explain)  
**Name Change Effective 7-1-85**

If change of ownership give name and address of previous owner  
**Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                         |                      |                                                           |                                                      |           |
|-------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------|------------------------------------------------------|-----------|
| Lessee Name<br><b>Amco D</b>                                                                                            | Well No.<br><b>5</b> | Pool Name, including Formation<br><b>Atoka San Andres</b> | Kind of Lease<br>State, Federal or Fee<br><b>Fee</b> | Lease No. |
| Location<br>Unit Letter <b>L</b> : <b>2310</b> Feet From The <b>South</b> Line and <b>330</b> Feet From The <b>West</b> |                      |                                                           |                                                      |           |
| Line of Section <b>18</b> Township <b>18N</b> Range <b>27E</b> , NMPM, <b>Exedy</b> County                              |                      |                                                           |                                                      |           |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                                                     |                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br><b>Marathon Petroleum Co. Pipeline Division</b> | Address (Give address to which approved copy of this form is to be sent)<br><b>North Freeman Ave. Artesia, NM 88210</b> |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br><b>Phillips Petroleum Co.</b>           | Address (Give address to which approved copy of this form is to be sent)<br><b>4001 E. 2nd St. Tulsa, OK 74114</b>      |
| If well produces oil or liquids, give location of tanks.<br>Unit <b>H</b> Sec. <b>13</b> Twp. <b>18N</b> Rge. <b>27E</b>                                            | Is gas actually connected? <b>Yes</b> When <b>6-8-71 Post FD-3</b>                                                      |

If this production is commingled with that from any other lease or pool, give commingling order number: **7-26-85**

NOTE: Complete Parts IV and V on reverse side if necessary.

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.

**R.D. Pitzer**  
(Signature)

Area Engineer  
(Title)

5-31-85  
(Date)

OIL CONSERVATION DIVISION

APPROVED **JUL 18 1985**  
Original Signed By **Mike Williams**  
BY **Oil & Gas Inspector**  
TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, 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.