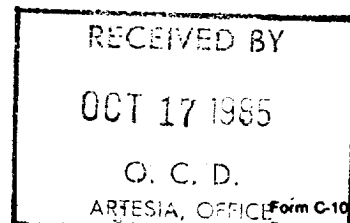


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT



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

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

| | |
|------------------------|-------------------------------------|
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| DISTRIBUTION | |
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| LAND OFFICE | |
| TRANSPORTER | <input checked="" type="checkbox"/> |
| OIL | |
| GAS | <input checked="" type="checkbox"/> |
| OPERATOR | <input checked="" type="checkbox"/> |
| PERMITS OFFICE | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|---|------------------------------|
| Operator CHEVRON U.S.A. INC. <input checked="" type="checkbox"/> | | |
| Address P. O. Box 599, Denver, CO 80201 | | |
| Reason(s) for filing (Check proper box) | | Other (Please explain) |
| <input type="checkbox"/> New Well | <input type="checkbox"/> Change in Transporter of: | Name Change Effective 7-1-85 |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas | |
| <input checked="" type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate | |

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

| | | | | |
|---|------------------------|--|---|------------------------------|
| Lease Name <u>White City Penn Gas Co</u> | Well No. <u>2</u> | Pool Name, including Formation <u>White City Penn Gas</u> | Kind of Lease <u>State, Federal or Fee</u> | Lease No. <u>LC 06545</u> |
| Location <u>Unit #3</u> | | | | |
| Unit Letter <u>J</u> | <u>1650</u> | Feet From The <u>South</u> Line and <u>1650</u> | Feet From The <u>East</u> | |
| Line of Section <u>28</u> | Township <u>24S</u> | Range <u>26E</u> | NMPM, <u>Eddy</u> | County |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <u>None</u> | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <u>Transwestern Pipeline</u> | <u>Box 2018, Roswell NM 88201</u> |
| If well produces oil or liquids, give location of tanks. | Is gas actually connected? <u>Yes</u> When <u>Unknown</u> |

If this production is commingled with that from any other lease or pool, give commingling order number: Post FD-3

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. Pitie
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 28 1985, 19
BY Les A. Clements
TITLE Supervisor District II

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.