STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 Revised 10-01-78 DISTRIBUTION Format 06-01-83 OIL CONSERVATION DIVISION SANTA PE Page 1 P. O. BOX 2088 FILE U.S.G.4. SANTA FE, NEW MEXICO 87501 LAND OFFICE OIL TRANSPORTER GAS REQUEST FOR ALLOWABLE OPERATOR PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL Operator CHEVRON U.S.A. INC. Address P. O. Box 599, Denver, CO 80201 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Name Change Effective 7-1-85 Recompletion Dry Gos Change in Ownership Casinghead Gas Condensate If change of ownership give name Gulf Oil Corp., P. O. Box 670, Hobbs, NM and address of previous owner. 88240 II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, including Formation Kind of Lease Legge No. State, Federal or Fee Location Line of Section Range NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cti or Condensate 🔀 of Casingnead Gas or Dry Gas IS to be sent! Rge. 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. SUPERVISOR DISTRICT TITLE

(Signature)

(Title)

(Date)

Area Engineer

5-31-85

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 weils.