STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 --. -- (-----Revised 10-01-78 DISTRIBUTION Format 06-01-83 OIL CONSERVATION DIVISION SAMTA PE Page 1 P. O. BOX 2088 FILE U.S.G.8 SANTA FE, NEW MEXICO 87501 LAND OFFICE GAS REQUEST FOR ALLOWABLE OPERATOR AND PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator CHEVRON U.S.A. P. O. Box 670. 88240 Hobbs Reason(s) for filing (Check proper cox) Other (Please explain) Change in Transporter of: Name Change Effective 7-1-85 CII Recompletion Dry Gas Change in Ownership Casinchead Gas Condensate If change of ownership give name Gulf Oil Corp., P. O. Box 670, Hobbs, NM and address of previous owner II. DESCRIPTION OF WELL AND LEASE Fool Name, including Formation King of Legae Lease No. State, Federal or Fee Line of Section County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this form is to be sent) of Authorized Transporter of Castaghead or Dry Gas S Rge. well produces oil or liquids 34 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.

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.

Area Engineer

(Title)

5-31-85 (Date) This form is to be filed in compliance with RULE 1104.

DISTRICT 1 SUPERVISOR

OIL CONSERVATION DIVISION

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.