STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 Revised 10-01-78 DISTRIBUTION OIL CONSERVATION DIVISION Format 06-01-83 SANTA FE Page 1 FILE P. O. BOX 2088 V.4.G.4. SANTA FE, NEW MEXICO 87501 LAND OFFICE TRANSPORTER REQUEST FOR ALLOWABLE OPERATOR PROBATION OFFICE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator CHEVRON U.S.A. Address P. O. Box 670, Hobbs 88240 50 N 24 Reason(s) for tiling (Check proper box) Other (Please explain) Change in Transporter of: Name Change Effective 7-1-85 Recompletion Dry Gas 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 II. DESCRIPTION OF ND LEASE Pool Name, including Formation Legse No. State, Federal or F Count TRANSPORTER OF OIL AND NATURAL GAS or Condensate Address (Give address to which approved copy of this form is to be sent) be sent/ If well produces oil or liquids, Twp. Ros. When give location of tanks. If this production is commingied 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.

(Signalwa) Area Engineer (Tille)

(Date)

OIL CONSERVATION DIVISION

DISTRICT 1 SUPERVISOR

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 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.

JUN 26 198