| STATE OF NEW MEXICO  |  |  |  |
|--|--|--|--|
| ENERGY AND MINERALS DEPARTMENT                                   |  |  |  |
| 99. 80 tobico settinto   |  |  |  |
| DISTRIBUTION   |  |  |  |
| BANTAPE  |  |  |  |
| FILE   |  |  |  |
| U.a.a.s.   |  |  |  |
| LAND OFFICE  |  |  |  |
| TRANSPORTER OIL  |  |  |  |
| GAS .  |  |  |  |
| OPERATOR   |  |  |  |
| PROBATION OFFICE   |  |  |  |
| I. At  |  |  |  |
| Operator   |  |  |  |
|  |  |  |  |
| CHEVRON U.S.A. INC.  |  |  |  |
| Address  |  |  |  |
| P. O. Box 670 Hobbs MM   |  |  |  |
| P. O. Box 670, Hobbs, NM Reason(s) for filing (Check proper box) |  |  |  |
| 1  |  |  |  |
|  |  |  |  |
| Recompletion   |  |  |  |
| X Change in Ownership  |  |  |  |
|  |  |  |  |
| If change of ownership give name Gulf                            |  |  |  |
| and address of previous owner Gull                               |  |  |  |
|  |  |  |  |
| II. DESCRIPTION OF WELL AND LEAS                                 |  |  |  |
| Lease Name   |  |  |  |
| Eunice Monument South 4.   |  |  |  |
| Location   |  |  |  |
| 1000   |  |  |  |
| Unit Letter : // : // Fe   |  |  |  |
|  |  |  |  |
| Line of Section Township   |  |  |  |
|  |  |  |  |
| III. DESIGNATION OF TRANSPORTER                                  |  |  |  |
| Name of Authorized Transporter of Cil                            |  |  |  |
| I(V, 0, 0, 1)  |  |  |  |
| Stell Fiplline Cor   |  |  |  |
| Name of Authorized Transparter of Castagneed C                   |  |  |  |

## 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

|  | ·  |
|--|--|
| TRANSPORTER OIL DAS  | n en   |
| OPERATOR REQUEST FO  | DR ALLOWABLE   |
|  | AND  |
| AUTHORIZATION TO TRAN  | SPORT OIL AND NATURAL GAS  |
| <del></del>  | ON TOTE AND MATURAL GAS  |
| Operator   |  |
| CHEVRON U.S.A. INC.  |  |
| P. O. Box 670, Hobbs, NM 88240   |  |
| Reason(s) for filing (Check proper box)                                  | Other (Please explain)   |
| New Well Change in Transporter of:                                       | 1  |
| X Change to Company to   | Name Change Effective 7-1-85   |
| If change of ownership give name Gulf Oil Corp., P. O.                   | Box 670, Hobbs, NM 88240   |
| II. DESCRIPTION OF WELL AND LEASE  |  |
| Eurice Monument South 455 Eurice Mules                                   |  |
| Unit Letter K: 1980 Feet From The South Lit                              | e and 1980 Feet From The Hest  |
| Line of Section 21 Township 2/5 Range                                    | 36E, NMPM, Lea County  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL                       |  |
| Name of Authorized Transporter of Cit Condensate                         | Address (Give address to which approved come of this format  |
| Stell Pipeline Corp.   | Boy 1910, Midland 24 79701   |
| Phillips tetrolum  | Address (Give address to which approved copy of this form is to be sent)   |
| If well produces oil or liquida, Unit Sec. Twp. Rgs.                     | Is gas actually connected? When //   |
| 1 id id 30:360   | yes! arrown  |
| 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  | OIL CONSERVATION DIVISION  |
| • .  | The solution of the property o |

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.

(Signature)

Area Engineer (Tille)

5-31-85

(Date)

| OF COMSERVATION DIVISION    |     |
|-----------------------------|-----|
| APPROVED SEP - 3 1305       |     |
| BY PAREN Soy ton            | · . |
| TITLE DISTRICT 1 SUPERVISOR |     |
|                             |     |

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

If this is a request for silowable 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