STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

60. pr 19740 0145W10					
DISTRIBUTION					
8447A F#					
PILE					
V.1.0.1.					
LAND DFFICE					
TRANSPORTER	OIL				
	GAS				
OPERATOA					
PROBATION OFFICE					

OIL CONSERVATION DIVISION P. O. BOX 2018 SANTA FE, NEW MEXICO 87501

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

•						
Opersion			•			
TEXACO Producing Inc.						
P. O. Box 728, Hobbs, New	Mexico 88240					
Reason(s) for filing (Check proper box)			Other (Please explain)			
Now Well	Change in Transporter of:	Change of Operator from Getty to TEXACO Producing Inc. 12/31/84				
Recompietion	OII	Dry Gas				
X Change in Ownership	Casinghead Gas	Condensate	<u> </u>			
I change of ownership give name						
nd address of previous owner						
I. DESCRIPTION OF WELL AND LE	ASE			Kind of Lease	Lease No.	
Lease fians	Mell No. Pool Manie, the	Drinkard		Signe. Federal or Fee State	B7896	
State "O"	23 Lovington	DIHRAIG				
Location	Courth		990	Feet From The East		
Unit Letter P : 990	Feet From The South	Line and				
Line of Section 31 Township	, 16S Ran	37 E	, NMPM	, Lea	County	
Cina di Section						
III. DESIGNATION OF TRANSPORT	TER OF OIL AND NAT	TURAL GAS	(Cive padress	to which approved copy of this form	is to be sent/	
Texas N.M. Pipeline Co. (01 Condensate []	Р.	O. Box 252	8, Hobbs, N.M. 88240		
Name of Authorized Transporter of Casingne		Acdress	(Give cadress	to which approved copy of this form	is to be sentj	
Phillips Petroleum Compan	ΥΥ.	1 40		k, Odessa, TX 79760		
Uni			ctually connect	when Unknown		
If well produces oil or liquids. give location of tanks.		37E Yes				
If this production is commingled with the	at from any other lease o	r pool, give cor	nmingling orde	number:		
NOTE: Complete Parts IV and V on						
		11	טוו ס	ONSERVATION DIVISION		
VI. CERTIFICATE OF COMPILANCE						
APPROVED						
been complied with and that the information given is true and complete to the best of						
my knowledge and belief.			DISTRICT 1 SUFERVISOR			
		TITL	Ε			
w.B. hl			This form is to	be filed in compliance with AL	JLE 1104.	
			this form mus	uest for allowable for a newly di t be accompanied by a tabulatio	U OI IDS GSAITIID.	
(Signature)		tests	taken on the	Mell to accordance with MALE	111.	
District Operations Manag	C.L.	able	All sections of this form must be filled out completely for allow able on new and recompleted wells.			
April 30, 1985			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.			
(Date)			eparate Form	C-104 must be filed for each	pool in multiply	
•		i comp	eted wells.			