

NO. OF PAGES THIS CARD		
C O N T E N T S		
SANTA FE		
FILE		
USGS		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROMOTION OFFICE		

P. O. BOX 2088

Form C-104
Revised 10-01-79
Format GS-91-43
Page 1

L.

Operator

~~TEXACO PRODUCING INC.~~

Address

P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well

☐ Reconciliation

☐ Change in Ownership

Change in Transporter of:

C11

☐ Castinghead Gas

☐ Dry Gas

Condensate	
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Other (Please explain)

Change of Operator from TEXACO INC. TO
TEXACO PRODUCING INC. effective 6/1/85.

If change of ownership give name
and address of previous owner _____

Lease Name Central Vacuum Unit	Well No. 117	Pool Name, including Formation Vacuum Grayburg San Andres	Kind of Lease State, Federal or Free	State State	Lease No. B-1031
Location					
Unit Letter O	990	South	2310	East	
Feet From The _____ Line and _____ Feet From The _____					
Line of Section 6	Township 18S	Range 35E	, NMPM, Lea		County

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Mobil Pipe Line Company Texas N.M. Pipe Line Co. (0095-0799)					Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Dallas, TX 75221 P.O. Box 2528, Hobbs, N.M. 88240	
Name of Authorized Transporter of Gas ☒ or Dry Gas ☐ Phillips Petroleum Co. TEXACO Inc.					Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762 P.O. Box 728, Hobbs, N.M. 88240	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 31	Twp. 17S	Rge. 35E	Is gas actually connected? Yes	when 8/1/79

If this production is commingled with that from any other lease or pool, give commingling order numbers:

NOTE: Complete Parts IV and V on reverse side if necessary.

I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled accurately and that the information given is true and complete to the best of my knowledge and belief.

B. L.

(Signature)

1. Mr. J. Edgar Hoover

(Time)

153187

APPROVED

6/1 25

BY

DISTRICT 1 SUPERVISOR

TITLE

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 allow-
ance on new and uncompleted work.

Fill out ONLY Sections I, II, III, and IV for a change of name, address, or number, or transportation of other such change. Do not

Separate Form G-104 must be filed for each part of the completed will.