STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER OIL	
TRANSPORTER GAS	
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Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator: Texaco Producing Inc.

Address: PO Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

- [ ] New Well
- [ ] Recompletion
- [ ] Change in Ownership
- Change in Transporter of:
  - [ ] Oil
  - [ ] Dry Gas
  - [X] Casinghead Gas
  - [ ] Condensate

Other (Please explain)

Change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
East Eumont Unit	44	Eumont Yates 7-Rivers Queen	State	E-2721

Location

Unit Letter L : 660 Feet From The West Line and 1980 Feet From The South

Line of Section 15 Township 19S Range 37E, NMPM, Lea County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: Texas New Mexico Pipeline Co (0055-1951)

Address (Give address to which approved copy of this form is to be sent): PO Box 2528, Hobbs, New Mexico 88240

Name of Authorized Transporter of Casinghead Gas [XX] or Dry Gas [ ]: None

Address (Give address to which approved copy of this form is to be sent):

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	SW/4	15	19	37	No	

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.

J. A. Hera
(Signature)

Hobbs Area Superintendent 397-3571
(Title)

9-9-88
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 22 1988, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I 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 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.