## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	****	
DISTRIBUTION		
BANTA PE		
FILE		
U.S.D.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-63 Page 1

Separate Forms C-104 must be filed for each pool in multiply

## REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I			
Operator	•		
TEXACO Producing Inc.			
P. O. Box 728, Hobbs, New Mexico 88240			
Resson(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Change of Operator from Getty to		
Recompletion OII Dr	TEXACO Producing Inc. 12/31/84		
Change in Ownership Casinghead Gas Ca	ondensate		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, Including Fo	1 1		
B.E. Shipp 1 Lovington Pad	Idock State, Federal or Fee Fee		
Unit Letter G : 2173 Feet From The North Lin	e and 2173 Feet From The East		
	37E , NMPM, Lea County		
LINE DI SECTION			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transporter of Oil 🔀 or Condensate	Andreas (Give address to which approved copy of this form to be sent		
Texas N.M. Pipeline Co. (0095-0274)	P.O. Box 2528, Hobbs, N.M. 88240  Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas 📉 or Dry Gas	l e e e e e e e e e e e e e e e e e e e		
Phillips Petroleum Co.	4001 Penbrook, Odessa, TX 79762		
If well produces oil or liquids, G 32 16 37	Yes 10/1/71		
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.	n		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	APPROVED 6/1 19 85		
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	APPROVED, 19		
my knowledge and belief.	BY LIMIXION		
m) anomogo ano somo	DISTRICT I SUPERVISOR		
	TITLE		
w.B. hh	This form is to be filed in compliance with MULE 1104.		
0. D	If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
(Signature)			
District Operations Manager	All sections of this form must be filled out completely for allow		
April 30, 1985	able on new and recompleted wells.  Fill out only Sections I. II. III. and VI for changes of owner		
(Date)	well name or number, or transporter, or other such change of condition		

completed wells.