STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
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Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: TEXACO PRODUCING INC.

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

Reason(s) for filing (Check proper box)
- [ ] New Well
- [ ] Recompletion
- [x] Change in Ownership

Change in Transporter of:
- [ ] Oil
- [ ] Casinghead Gas
- [ ] Dry Gas
- [ ] Condensate

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 _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Central Vacuum Unit	102	Vacuum Grayburg San Andres	State	B-1306

Location

Unit Letter H ; 660 Feet From The East Line and 1980 Feet From The North

Line of Section 6 Township 18S Range 35E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [x] 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 Casinghead Gas [x] 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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	E	31	17S	35E	Yes	8/1/79

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.

W. B. [signature]
(Signature)

[illegible] Manager
(Title)

6/[illegible]
(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 19 85

BY [signature]

TITLE DISTRICT 1 SUPERVISOR

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 [illegible] well name or number, or transporter, or other such change [illegible]

Separate Forms C-104 must be filed for each pool in [illegible] completed wells.