## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

** ** ***** *******					
DISTRIBUTION					
FILE					
V.1.0.4.					
LAND OFFICE					
TRANSPORTER	DIL				
	GAS				
OPERATOR					
PROBATION OFFICE					

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

•									
Operator									
TEXACO Producing Inc.							<del></del>		
P. O. Box 728, Hobbs, New	Mexico	88240							
Reason(s) for filing (Check proper box)					Other (Please explain)				
New Well	Change in Transporter of:				Change of Operator from Getty to				
Recompletion	011		□ ▷	TEXACO Producing Inc. 12/31/84					
Y Change in Ownership	Cost	nghead Gas	□ c₀	ndensate					
f change of ownership give name and address of previous owner								<u>,</u>	
and sources or provinces of the same									
I. DESCRIPTION OF WELL AND LE	ASE	Foo. Name, Inciv	4150 F	*********		Kind of Lease		Lecse No	
Lease Name	3					State, Federal or Fee	State	B-2330	
East Eumont Unit	27	Eumont Yat	es /·	-R1V. Q	ueen				
Location B 660		North			1980		East		
Unit Letter;	_Feet Fro		Lin	• and		Feet From The			
9 🛖 🔐	19S	_	3	7E	, NMPM,	Lea		County	
Line of Section Township	P	Rand	•		, NMFM.			<del></del>	
			TACT	C 15					
III. DESIGNATION OF TRANSPORT		OIL AND NAI	UKAL	I Assteas (	Give address s	o which approved copy of	this form is to	be senij	
Texas New Mexico Pipeline	Co. (0	055-1951)		P.O. E	30x 2528,	Hobbs, NM 88240	12		
Shell Pipeline Corp.  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be so					be sent)				
	- 4	_	_	DO F	30x 1589	Tulsa, OK 74102			
That Sec. Two. Rge. Is gos octually connected? When									
If well produces oil or liquids, give location of tanks.	м : 3	19S	37E	Yes		· · · · _ · _ · _ · _ · _			
f this production is commingled with the		v other lease or	pool.	give com	ningling order	number:			
						<u> </u>			
NOTE: Complete Parts IV and V on	reverse s	ide if necessary	•						
				OIL CONSERVATION DIVISION					
VI. CERTIFICATE OF COMPLIANCE				6/1 85					
hereby certify that the rules and tegulations of the Oil Conservation Division have APPROVED						9			
been complied with and that the information given is true and complete to the best of									
my knowledge and belief.			DISTRICT I SUFERVISOR						
				TITLE	/ DISTRIC	1 1 SOFERVISOR			
w/b hl	•			_		he filed in compliance	with sulE	1104.	
W. B. A. If this is a request for allowable for a newly drille					newly drilled	or deepenes			
(Signature)					his form must	be accompanied by a t	abulation of	the deviation	
District Operations Manag	er			tests t	aken on the v	vell in accordance with	S MULE 111.	six for alles-	
(Title)				All able or	l sections of new and sec	this form must be filled tompleted wells.	. our combiere	,	
April 4, 1985			Fill out only Sections I. H. III. and VI for changes of owner						
(Date)				well name or number, or transporter, or other such change of condition-					
			Separate Forms C-104 must be filed for each pool in multiple						
!! complet						completed wells.			