

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-104  
Revised 10-01-78  
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Page 1

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U.S.D.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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 723, Hobbs, New Mexico 88240

Reason(s) for filing (check proper box)  
 New Well  
 Recompletion  
 Change in Ownership

Change in Transporter of:  
 Oil  
 Casinthead Gas  
 Dry Gas  
 Condensate

Other (Please explain)  
Change of Operator from Getty to TEXACO Producing Inc. 12/31/84

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Van Etten</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Eumont Yates 7-Rivers Queen</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>9</u> Township <u>20S</u> Range <u>37E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Shell Pipeline Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1910, Midland, TX 79702</u>			
Name of Authorized Transporter of Casinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Warren Petroleum Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1589, Tulsa, OK 74102</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>I</u>	Sec. <u>9</u>	Twp. <u>20S</u>	Req. <u>37E</u>
	Is gas actually connected? <u>Yes</u>		when <u>Unknown</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: PC-439

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. D. Lohr

(Signature)

District Operations Manager

April 30, 1985 (Date)

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/01/85, 19  
 BY James Linton  
 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 deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all: able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed wells.