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| AMOUNT                |     |
| FILE                  |     |
| F.C.C.                |     |
| LAND OFFICE           |     |
| TRANSPORTER           | OIL |
| OPERATOR              | GAS |
| REGISTRATION OFFICE   |     |

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

|  |  |
|--|--|
| Reason(s) for filing (Check proper box)  | Other (Please explain)   |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership<br><input type="checkbox"/> Change in Transporter of:<br><input type="checkbox"/> Oil<br><input type="checkbox"/> Castnqhead Gas<br><input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Condensate | Change of Operator from Getty to<br>TEXACO Producing Inc. 12/31/84 |

Change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

| Well Name        | Well No.   | Pool Name, including Formation | Kind of Lease               | Lease No. |
|------------------|--|--------------------------------|-----------------------------|-----------|
| East Eumont Unit | 61   | Eumont Yates 7-Riv. Queen      | State, Federal or Fee State | B-1973    |
| Location         | Unit Letter <u>P</u> : <u>330</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line of Section <u>22</u> Township <u>19S</u> Range <u>37E</u> , NMPM, Lea County |                                |                             |           |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br><u>Texas New Mexico Pipeline Co. (0055-1951)</u><br><u>Well Pipeline Corp.</u> | Address (Give address to which approved copy of this form is to be sent)<br><u>P.O. Box 2528, Hobbs, NM 88240</u><br><u>P.O. Box 1910, Midland, TX 79702</u> |
| Name of Authorized Transporter of Castnqhead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br><u>Warren Petroleum Corp.</u>  | Address (Give address to which approved copy of this form is to be sent)<br><u>P.O. Box 1589, Tulsa, OK 74102</u>  |
| Well produces oil or liquids, or location of tanks.<br>Unit <u>P</u> Sec. <u>22</u> Twp. <u>19</u> Rge. <u>37</u>  | Is gas actually connected? <u>Yes</u> When <u>1957</u>   |

If its 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.

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. Loh

(Signature)

District Operations Manager

(Title)

April 4, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 1985  
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 owner, well name or number, or transporter, or other such change of condition.

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