## STATE OF NEW MEXICO NERGY AND MINERALS DEPARTMENT

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DISTRIBUTE	DM	
BANTA PE		
FILE		
V.1.0.4.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFF	KE	

## 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

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

## REQUEST FOR ALLOWABLE

PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
Operator	<del></del>			<del></del>	· <del></del>			•
Texaco Producing Inc.		_						
Address		<del>-</del>		<del></del>	<del>,</del>	<del> </del>		
P.O. Box 728, Hobbs, New	Mexico	88240						
Reason(s) for filing (Check proper box)			<del></del>		Other (Please	explain)		
New Well	Change in	a Transporter of	:		Change of Change from Thomas T			
Recompletion	OII			Change of Operator from Texaco Inc. to Texaco Producing Inc. Effective 01/01/8				
Change in Ownership	Cast	nghead Gas		Condensate	Texaco	rioducing	mc. Erre	SCTAG 01/01/9
f change of ownership give name and address of previous owner								
I. DESCRIPTION OF WELL AND L		Deal Mana In	-1	Farmulan		Kind of Lease		·
Lease Name	MEIT MO	Pool Name, Inc		Rúurs				Lease No.
J. W. Cooper	<u> </u>	Fumont.^(				State, Federal	Fee Fee	
Unit Letter G : 3641, 7	_Feet Fro	m The Sol	uth c	ine and	3631 - <sup>3</sup>	Feet From Ti	• <u>West</u>	
Line of Section 5 Townshi	P 20S	. Ro	ange	_37E	, NMPM	Lea		County
		<u></u>	,			п_		
III. DESIGNATION OF TRANSPOR	TER OF	OIT AND NA	TTIRA	I. GAS				
Name of Authorized Transporter of Oil		ondensate	11010		Give address i	o which approve	d copy of this for	m is to be sent)
None				1		•		
Name of Authorized Transporter of Casingh	ead Gas	or Dry Gas		Address	Give address i	o which approve	d copy of this for	m is to be sent)
Northern Natural Gas Compar			_	ע צככם	+2 anh	Omobo Wol	raska 6810	10
Uni	<del></del>	. Twp.	Rge.		tually connecte			<u>''</u>
If well produces oil or liquids, give location of tanks.	i		) * )	Yes			known	
<u> </u>							IZIIOAII	
f this production is commingled with th	at from an	y other lease	ot boor	, give com	utuättua osaas	number:		<del> </del>
NOTE: Complete Parts IV and V on	reverse s	ide if necessar	ry.					
Л. CERTIFICATE OF COMPLIANCE			Ĭ.		OIL C	ONSERVATI	ON DIVISION	J
				. 		AAAV	4 1987	. •
hereby certify that the rules and regulations o seen complied with and that the information give	t the Oil Co	onservation Divisi nd complete to th	ion have	APPR	OVED	MAT	4 1997	
ny knowledge and belief.	CH IS GUC ZI	a complete to the	c Dest Of	BY	190	11/2	land	13
•								
				TITLE	Geo]	ogist		
14.1	•			70	is form is to	he filed in co	mpliance with	BHL F 1164
1111 0000	ninc	>		11				drilled or deepene
(Signoswe) District Admi		tive Super	viso	well, th	nie form must	be accompani		ion of the deviation
(Tule) February 09, 1987			All able on	All sections of this form must be filled out completely for silowable on new and recompleted wells.				
(Date)				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.				

APR 23 BOT OCHICE