STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER OIL	
TRANSPORTER GAS	
OPERATOR	
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Form C-104
Revised 10-1-78
Formerly C-104
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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

Operator
TEXACO Inc.

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

Reason(s) for filing (Check proper box)

- New Well
- Recompletion
- Change in Ownership

Change in Transporter of:

- [ ] Oil
- [ ] Dry Gas
- [X] Casinghead Gas
- [ ] Condensate

Other (Please explain)
Change of Transporter from Getty Oil Co. to TEXACO PRODUCING INC. effective 6/1/85.

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
A.H. Blinebry FED NCT-4	2	Blinebry Oil & Gas	FED LC-032104	

Location

Unit Letter O ; 660 Feet From The South Line and 1980 Feet From The East

Line of Section 31 Township 22S Range 38E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: Texas N.M. Pipeline Co. (0055-1420)
Address (Give address to which approved copy of this form is to be sent): P.O. Box 2528, Hobbs, N.M. 88240

Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]: Texaco Producing Inc.
Address (Give address to which approved copy of this form is to be sent): P.O. Box 3000, Tulsa, OK 74102

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	31	22S	38E	Yes	Not available

If this production is commingled with that from any other lease or pool, give commingling order number: PC-63

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. B. [illegible]
(Signature)

District Operations Manager
(Title)

7/1/85
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 22 1985, 19 85

BY [illegible]

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 multiply completed wells.