

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

MAY 28 1985

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator TEXACO Producing Inc. ✓	
Address P.O. Box 728, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☒ Change in Ownership	Change of Operator from Getty to TEXACO Producing Inc. 12/31/84
Change in Transporter of: ☐ Oil ☐ Casinthead Gas ☐ Dry Gas ☐ Condensate	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Skelly Unit	Well No. 68	Pool Name, including Formation Gravburg Jackson-7-Rivers Queen Gravburg San Andres	Kind of Lease State, Federal or Fee FED LC-029418(A)
Location Unit Letter <u>K</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>21</u> Township <u>17S</u> Range <u>31E</u> , NMPM. Eddy County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas N.M. Pipeline Co. (0096-0812)	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 Casinthead Gas ☒ or Dry Gas ☐ Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent.) P.O. Drawer 1267, Ponca City, OK 74603
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when. A 22 17S 31E Yes 6/1/60

If this production is commingled with that from any other lease or pool, give commingling order number: PC-450

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. B. L. L.

(Signature)

District Operations Manager

(Title)

April 19, 1985

(Date)

OIL CONSERVATION DIVISION

MAY 29 1985

APPROVED _____, 19 _____

BY _____
ORIGINAL SIGNED
BY LARRY BROOKS
GEOLOGIST - NMOC

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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 filled for each pool in multi-completed wells.

Post ID-3
6-7-85
Chg Op