STATE OF NEW MEMICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		7	1
TRAMSPORTER	OIL	1	
	GAS	1	
OPERATOR		$\overline{}$	
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Pevised 10:01:75 Format 06-01-23 Page 1

Separate Forms Co.24 must be filed for each poor in mutip.

REQUEST FOR ALLOWABLE

PROBATION OFFICE	IND		
AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS		
Operator			
TEXACO Inc.			
Address			
P. O. Box 728, Hobbs, New Mexico 88240			
Reason(s) for Isling (Check proper box)	Other (Please explain)		
New Weil Change in Transporter of:	Change of Transporter from Getty Oil Co.		
Recompletion OII D	to TEXACO PRODUCING INC. effective 6/1/85		
X Change in Ownership XX Castnahead Gas C	ondensate		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Wall No. Pool Name, including F	ormation Kind of Lease No.		
A.H. Blinebry Federal NCT-1 4 Blinebry Oil			
Location			
Unil Letter : Feet From The South Lir	1980 East		
Line of Section 20 Township 22S	38E Name Lea		
Line of Section Township 225 Range	NMPM, Led County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	CAS		
Name of Authorized Transporter of Oil Of Oil And Italian Give address to which approved copy of this form is to be a			
Texas N.M. Pipeline Co. (0055-0070)	P.O. Box 2528, Hobbs, N.M. 88240		
ime of Authorized Transporter of Casinghead Gas 💢 or Dry Gas 🗌 Address (Give address to which approved copy of this form is to be			
exaco Producing Inc. P.O. Box 3000, Tulsa, OK 74102			
If well produces oil of liquids, Unit Sec. Twp. Rqs.	is gas actually connected? When		
give location of tanks. H ! 19 22S : 38E	Yes Not available		
If this production is commingled with that from any other lease or pool,	give commingling order number: PC-244		
NOTE: Complete Parts IV and V on reverse side if necessary.			
The fact of the fa			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED JUL 2 9 1005 6/1 18 85		
been complied with and that the information given is true and complete to the best of			
my knowledge and belief.	BY James John		
·	TITLE DISTRICT I SUFERVISOR		
W. B. hoh	This form is to be filed in compliance with RULE 1104.		
(Signature)	If this is a request for silowable for a newly drilled or descence well, this form must be accompanied by a tabulation of the deviation		
District Operations Manager	tests taken on the well in accordance with AULI 111.		
6/1/85	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
9, 2, 00	Fill out only included I II III and VI for changes of gwone		
(5318)	well name or number, or manaporter or other such change of condition		

Separate For