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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTO. C. D.  
ARTESIA OFFICEForm C-104  
Revised 10-01-78  
Format 06-C-1-83  
Page 1

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                        |                                     |
|------------------------|-------------------------------------|
| NO. OF COPIES REQUIRED |                                     |
| DISTRIBUTION           |                                     |
| SANTA FE               | <input checked="" type="checkbox"/> |
| FILE                   | <input checked="" type="checkbox"/> |
| U.S.G.S.               |                                     |
| LAND OFFICE            |                                     |
| TRANSPORTER            | <input type="checkbox"/>            |
| OPERATOR               | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE      |                                     |

Operator  
TEXACO Producing Inc.

WJW

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  
☐ Gas  
☐ Condensate

Other (Please explain)

Change of Operator from Getty to  
TEXACO Producing Inc. 12/31/84Change of ownership give name  
and address of previous owner

## I. DESCRIPTION OF WELL AND LEASE

|             |          |  |                       |                   |
|-------------|----------|--|-----------------------|-------------------|
| Lease Name  | Well No. | Pool Name, including Formation                         | Kind of Lease         | Lease No.         |
| Skelly Unit | 22       | Grayburg Jackson-7-Rivers<br>Queen Grayburg San Andres | State, Federal or Fee | FED LC-029418 (A) |

Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East  
 Line of Section 14 Township 17S Range 21E , N.M.P.M. Eddy County

## II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Injection

Name of Authorized Transporter of Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)

|   |      |      |      |      |                            |      |
|---|------|------|------|------|----------------------------|------|
| If well produces oil or liquids,<br>give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
|   |      |      |      |      |                            |      |

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.

## I. 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

April 19, 1985

(Title)

(Date)

## OIL CONSERVATION DIVISION

APPROVED MAY 29 1985 , 19BY 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 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 allow-  
able 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 multi-  
completed wells.Post ID-3  
6-9-85  
Chg ap