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Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTOIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I. Operator  
TEXACO Producing Inc. W/WAddress  
P.O. Box 728, Hobbs, New Mexico 88240Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Gashead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)  
Change of Operator from Getty to  
TEXACO Producing Inc. 12/31/84If change of ownership give name  
and address of previous ownerII. DESCRIPTION OF WELL AND LEASE  
Lease Name: Skelly Unit  
Well No.: 24  
Pool Name, including Formation: Grayburg Jackson-7-Rivers  
Queen Grayburg San Andres  
Kind of Lease: State, Federal or Fee  
Lease No.: RED 10-229418(A)  
Location:  
Unit Letter: L 1980 Feet From The South Line and 660 Feet From The West  
Line of Section: 14 Township: 17S Range: 31E NMPM: Eddy County: Curry  
Pack ID-3  
6-2-85  
Chs 00III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil: ☐ or Condensate: ☐  
Injection  
Address (Give address to which approved copy of this form is to be sent):  
Name of Authorized Transporter of Gashead Gas: ☐ or Dry Gas: ☐  
Address (Give address to which approved copy of this form is to be sent):  
If well produces oil or liquids, give location of lease:  
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.

## 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

APPROVED MAY 29 1985, 19  
BY ORIGINAL SIGNED  
BY LARRY BROOKS  
TITLE GEOLOGIST - NMOCD

This form is to be filled 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 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 filled for each pool in multiple completed wells.