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STATE OF NEW MEXICO
 ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
 P. O. BOX 2028
 SANTA FE, NEW MEXICO 87501

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)
 New Well
 Recompletion
 Change in Ownership
 Change in Transporter of:
 Oil
 Casingshead Gas
 Dry Gas
 Condensate
 Other (Please explain)
 Change of Operator from Getty to
 TEXACO Producing Inc. 12/31/84

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Skelly Unit	Well No. 106	Pool Name, Including Formation Grayburg Jackson-7-Rivers Queen Grayburg San Andres	Kind of Lease State, Federal or Fee FED LC-029420	Location
Unit Letter C	Feet From The .660	Line and North	Feet From The 1980	West
Line of Section 15	Township 17S	Range 31E	, NMPM, Eddy Co.	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> 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 Casingshead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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: A Sec: 22 Twp: 17S Rge: 31E	Is gas actually connected? Yes when: 2/25/71

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. Post ID-3
6-7-85
Chg OP

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. hkh
 District Operations Manager
 April 19, 1985

OIL CONSERVATION DIVISION
 MAY 29 1985
 APPROVED _____, 19____
 BY _____
 ORIGINAL SIGNED
 BY LARRY BROOKS
 GEOLOGIST - NMCD
 TITLE _____

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev. tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for a well on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conc.
 Separate Forms C-104 must be filed for each pool in multi-completed wells.