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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTC. C. D.  
ARTESIA, OFFICEForm C-104  
Revised 10-01-78  
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SANTA FE	<input checked="" type="checkbox"/>	
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TRANSPORTER	<input checked="" type="checkbox"/>	
OIL	<input checked="" type="checkbox"/>	
GAS	<input checked="" type="checkbox"/>	
OPERATOR	<input checked="" type="checkbox"/>	
PRODUCTION OFFICE	<input type="checkbox"/>	

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

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

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 Lea "C"	Well No. 10	Pool Name, including Formation Grayburg-Jackson-7-Rivers	Kind of Lease State, Federal or Fee	Lease No. FED-IC-029418-b
Location Queen-Grayburg-San Andres				
Unit Letter E	1980	Feet From The North	Line and 660	Feet From The West
Line of Section 11	Township 17S	Range 31E	NMPM, Eddy	County

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

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-NM Pipeline Co. (0096-0583)	P.O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Conoco, Inc.	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?
F 11 17S 31E	Yes 8/3/72

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

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. L.  
(Signature)

District Operations Manager

April 10, 1985

(Title)

(Date)

## OIL CONSERVATION DIVISION

APPROVED MAY 29 1985, 19 \_\_\_\_\_

BY ORIGINAL SIGNED  
BY LARRY BROOKS  
GEOLOGIST - NMCCD

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 deviated  
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all  
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 multiple  
completed wells.Pest ID-3  
6-2-85  
Chg op