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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	<input checked="" type="checkbox"/>
	GAS	<input checked="" type="checkbox"/>
OPERATOR		<input checked="" type="checkbox"/>
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

O. C. D.
ARTESIAL OFFICEForm C-104
Revised 10-01-78
Format 06-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator TEXACO Producing Inc. <input checked="" type="checkbox"/>		
Address P.O. Box 728, Hobbs, New Mexico 88240		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	Change of Operator from Getty to TEXACO Producing Inc. 12/31/84
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lea "C"	Well No. 16	Pool Name, including Formation Grayburg-Jackson-7-Rivers Queen-Grayburg-San Andres	Kind of Lease State, Federal or Fee	Lease No. FED-IC-029418-b
Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>11</u> Township <u>17S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> 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, N.M. 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.
	F	11
	Twp.	17S
	Rge.	31E
Is gas actually connected?	When	
Yes	9/24/72	

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. 

(Signature)

District Operations Manager

(Title)

April 10, 1985

(Date)

OIL CONSERVATION DIVISION

MAY 29 1985

APPROVED _____, 19 _____

BY _____
ORIGINAL SIGNED
BY LARRY BROOKS
GEOLOGIST - NMOCD
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 deviatric
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 multiple
completed wells.Post 10-3
6-7-85
Chg up