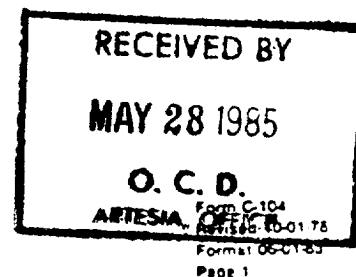


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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



REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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 ☐ Dry Gas  
☐ Casinghead 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

I. DESCRIPTION OF WELL AND LEASE

Lease Name Skelly Unit	Well No. 115	Pool Name, including Formation Fren 7-Rivers	Kind of Lease State, Federal or Fee	Lease No. LC-029419(A)
Location Unit Letter <u>F</u> : <u>2630</u> Feet From The <u>North</u> Line and <u>1330</u> Feet From The <u>West</u> Line of Section <u>22</u> Township <u>17S</u> Range <u>31E</u> , N.M.P.M., <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.) 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.) P.O. Drawer 1267, Ponca City, OK 74603
If well produces oil or liquids, give location of tanks.	Unit <u>H</u> Sec. <u>22</u> Twp. <u>17-S</u> Rge. <u>31-E</u> Is gas actually connected? <u>Yes</u> When <u>3/12/74</u>

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 - NMOC

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  
well name or number, or transporter, or other such change of conc

Separate Forms C-104 must be filed for each pool in m  
completed wells.

Post ID-3  
6-7-85  
Chg op