STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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O. C. D.

ARTESIA, OFFICE

OIL CONSERVATION DIVISION

P. O. BOX 2088 'SANTA FE, NEW MEXICO 87501 Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply

	OPERATOR	REQUEST FOR ALLOWABLE								
Texaco Producing Inc.							•		, (	1/
Texaco Producing Inc.  Address P. C. Box 728, Hobbs, New Mexico 88240  Research; for hing (Creek proper dost) New Well Recompletion OIL Change in Transporter of; OIL Change of Operator from Texaco Inc. To Texaco Producing Inc.  Change of Operator from Texaco Inc. To Texaco Producing Inc.  Change of Operator from Texaco Inc. To Texaco Producing Inc.  Change of Operator from Texaco Inc. To Texaco Producing Inc.  IL PERCENTION OF WELL AND LEASE  Lease Nore Dagger Draw  IL DESCRIPTION OF WELL AND LEASE  Lease Nore Dagger Draw  In Dagger Dra	I	AUTHOR	OT NOITASIS	TRANS	PORT OIL	. AND NATU	JRAL GA	.S		1
### P. C. Box 728, Hobbs, New Mexico 88240    Restorit) for hims (Check proper bay)   New Well   Change in Transporter of:	Operator				<del></del>	<del></del>				
### P. C. Box 728, Hobbs, New Mexico 88240    Restorit) for hims (Check proper bay)   New Well   Change in Transporter of:	Texaco Producing Inc	,								
Reseable   for filing (Check proper box)   New Well   New Well   Oil   Oregon in Transporter cli   Oil   Oregon in Change in Ornership   Oil   Oregon   Ornership   Oil   Ornership   Originol   Ornership   Originol   Ornership   Originol		<u></u>				<del></del>			<del></del>	<del></del>
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New Well   Change in Transporter of:   Day Gas   Change of Operator from Texaco Inc.   Casinghead Gas   Condensule   To Texaco Producing Inc.    If change of ownership give name and address of previous owner   BHP Petroltum Co. Inc., 1300 One First City Center, Midland, Tx - 7970!    II. DESCRIPTION OF WELL AND LEASE   Lease No.   Day Gas   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    Lease Nome   Day Gas   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    II. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    III. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    III. DESCRIPTION OF WELL AND LEASE   Lease No.   To Texaco Producing Inc.    III. DESCRIPTION OF WELL AND LEASE   To Texaco Producing Inc.    III. D	Reason(s) for tiling (Check proper h	, New Mexico	0 88240			0.1				
Recompletion    Clamps in Ownership   Claimpheed Gas   Condensure   Co			. T.g.,			Other (Pleas	e explainj			
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If change of ownership give name and address of previous owner BHP Petroleum Co. Inc., 1300 One First City Center, Midland, Fx 79701  II. DESCRIPTION OF WELL AND LEASE Leves Norw Norw North Co. Inc., 1300 One First City Center, Midland, Fx 79701  III. DESCRIPTION OF WELL AND LEASE Leves Norw North North Co. Inc., 1300 One First City Center, Midland, Fx 79701  III. DESCRIPTION OF WELL AND LEASE Leves North North Co. Inc., 1300 One First City Center, Midland, Fx 79701  III. DESCRIPTION OF WELL AND LEASE Leves North North Co. Inc., 1300 One First City Center, Midland, Fx 79701  III. DESCRIPTION OF WELL AND LEASE Leves North North Co. Inc., 1300 One First City Center, Midland, Fx 79701  III. DESCRIPTION OF WELL AND LEASE Leves North	175	=		$\equiv$	Dry Gas Change of Operator from Texaco Inc.					
II. DESCRIPTION OF WELL AND LEASE  Lesses Nome Dagger Draw  Well No. Pool Name, including Formation Begger Draw Strawn  Leose Nome Dagger Draw  Line of Section 32  Township 195  Range 25E NMPM, Eddy  County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Calinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquids, Unit Sec. Twp. Rge. If the production of tanks.  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  Hobbs Area Superintendent  (Signature)  Hobbs Area Superintendent  April 10, 1987	A Change in Ownership		ngnedd Gas		ondensate	10 16		Toducing	inc.	
II. DESCRIPTION OF WELL AND LEASE  Lesses Nome Dagger Draw  Well No. Pool Name, including Formation Dagger Draw  I Dagger Draw Strawn  Lesses Nome Unit Letter O : 660 Feet From The South Line and 1980 Feet From The East  Line of Section 32 Township 195 Range 25E NMPM, Eddy  County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Calinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquids, Unit Sec. Twp. Rge. If agas actually connected?  When  When  O'Riginal Signature)  Who O'Riginal Signature)  Hobbs Area Superintendent  (Title)  April 10, 1987	If change of ownership give name		-		_					
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Legis Name Dagger Draw  1 Dagger Draw Strawn State, Federal of Fee Federal NM 1895  Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line of Section 32 Township 195 Range 25E NMPM. Eddy County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Call or Condensate Address (Give address to which approved copy of this form is to be sent)  Name of Authorized Transporter of Casinghead Gos or Dry Gos Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquids, give location of tonks.  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.  (Signature)  Hobbs Area Superintendent  (Titls)  April 10, 1987										
Dagger Draw  Location  Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East  Line of Section 32 Township 198 Range 25E NMPM, Eddy County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Citi or Condensate Address (Give address to which approved copy of this form is to be sent)  Hame of Authorized Transporter of Casinghead Cas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquids, Unit Sec. Twp. Rgs. Is gas actually connected? When give location of tanks.  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 centify that the rules and regulations of the Oil Conservation Division have been emplied with ard that the information given is true and complete to the best of my knowledge and t.lief.  397-3571  Address (Give address to which approved copy of this form is to be sent)  ADPROVED APR 2 3 1987  FOriginal Signature of Compliance with mult in compliance with multiple or despense well, this form must be accompanied by a tabulation of the deviation set taken on the well in accordance with multiple or despense well, this form must be filled out completely for allowable on new and recompleted wells.  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.  Fill out only Sections I, II, III, and VI for changes of owner.			[6] . N				<del>,</del>		<u>-</u>	
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APR 2 3 1987  APR 2 3 1987  APR 2 3 1987  BY  Original Signal 5,  Les A C  TITLE  Supervise  This form is to be filled in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepense 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.			<del></del>	i	1	011 0	<b>01</b> 1050			
April 10, 1987  Py Original Signal 5,  Signature)  April 10, 1987  Py Original Signal 5,  Les A Complete to the best of my knowledge and bullet.  By Original Signal 5,  Les A Complete to the best of my knowledge and bullet.  This form is to be filled in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepense 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.	VI. CERTIFICATE OF COMPLIANCE			UIL CUNSERVATION DIVISION						
April 10, 1987  Py Original Signal 5,  Signature)  April 10, 1987  Py Original Signal 5,  Les A Complete to the best of my knowledge and bullet.  By Original Signal 5,  Les A Complete to the best of my knowledge and bullet.  This form is to be filled in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepense 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.	I hereby certify that the fules and regula	tions of the Oil Co	nservation Divisi	on have	APPR	WED	APR	2 3 1987	,	
TITLE  Supervise  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 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.	been complied with and that the information given is true and complete to the best of my knowledge and billief.				AFFRE				,	19
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Well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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.	Ja Alac									
Hobbs Area Superintendent  (Title)  April 10, 1987  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.	(Sign	iature)			well, th	is form must	be accor	mpanied by a	tabulation of	the deviation
April 10, 1987  April 10, 1987  Fill out only Sections I. II. III. and VI for changes of owner.	Hobbs Area Superin	tendent		li li	tests ta	ken on the v	vell in so	cordance wit	th MULE 111.	
April 10, 1987  Fill out only Sections I. II. III. and VI for changes of owner.	· · · · · · · · · · · · · · · · · · ·				All sections of this form must be filled out completely for allow-					
(Date)  (Date)  (Date)  (Date)  (Date)							•		ITT for -b.	
				-	well name or number, or transporter, or other such change of condition.					

Separate 10.