

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED BY

SEP 29 1986

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ARTESIA, OFFICE

Operator
Texaco Inc.

Address
P.O. Box 728, Hobbs, New Mexico 88240

Season(s) for filing (Check proper box)		Change in Transporter of:		Other (Please explain)
<input type="checkbox"/> New Well		<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas	Effective October 1, 1986
<input type="checkbox"/> Recompletion		<input type="checkbox"/> Casinghead Gas	<input checked="" type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership				

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
E.J. Levers Fed. NCT-1	1	Catclaw Draw Morrow Gas	State, Federal or Fee Federal	NM0454228
Location				
Unit Letter	N	: 660 Feet From The	South	Line and 1980 Feet From The
Line of Section	12	Township	21S	Range 25E, NMPM, Eddy County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texaco Trading & Transportation Inc. 1090-0489	P.O. Box 6196, Midland, Texas 79711-0196
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	First National Bldg., Dallas, TX 75270
Well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit N, Sec. 12, Twp. 21S, Rge. 25E	Yes 9/20/73

If this production is commingled with that from any other lease or pool, give commingling order number: 10-3-86

NOTE: Complete Parts IV and V on reverse side if necessary.

I. 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.

J. W. Browning
(Signature)

District Administrative Supervisor

September 26, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 30 1986, 19

BY Original Signed By

Les A. Clements

TITLE Supervisor District II

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, well name or number, or transporter, or other such change of condition.

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