

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

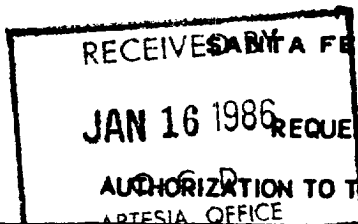
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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1



REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator ARCO Oil and Gas Company  
Division of Atlantic Richfield Company

Address P. O. Box 1710, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

☐ New Well  
☐ Recompletion  
☐ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate

Other (Please explain) Effective 1/01/85  
Getty Trading and Transportation Co. name  
changed to: Texaco Trading and Trans-  
portation Company

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State BT Com.</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>Avalon Morrow Gas</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>L-6705</u>
Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>North</u> Line and <u>1830</u> Feet From The <u>West</u> Line of Section <u>16</u> Township <u>21S</u> Range <u>26E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Texaco Trading and Transportation Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 6196, Midland, Texas 79711</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas Company</u> <u>Gas Company of New Mexico</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1384, Jal. New Mexico 88252</u> <u>P. O. Box 26400, Albuquerque, New Mexico 87125</u>
If well produces oil or liquids, give location of tanks. Unit <u>C</u> Sec. <u>16</u> Twp. <u>21S</u> Rge. <u>26E</u>	Is gas actually connected? <u>Yes</u> When <u>EPNG</u> <u>10/14/76</u> <u>GCNM</u> <u>12/13/77</u>

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.

*Edmund Dickens*  
(Signature)

Servics Supv.

(Title)

1/14/86

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 22 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.

Past ID-2  
1-24-86  
Chg. LT: GTT