STATE OF NEW MEXICO		ONSERVA		N .	Form C-104 Revised 10-01-7 Format 05-01-8 Page 1	
	ARRENT RECT OF A REAL PROPERTY OF	D. BOX				•
AND OFFICE	SEP 29-19	REQUEST FOR	ALLOWABLE D DRT OIL AND NATU			
	ARTESTA, OFF	ION TO TRANSPO	ORT OIL AND NATU	RAL GAS	· · · ·	
Texaco Inc.		•			<u> </u>	
P.O. Box 728, Hobbs, N	ew Mexico 88	240				• . •
			Other (Pleas	e esplain)		
eson(s) for filing (Check proper box New Well Recompistion Change in Ownership	Change in Tran	Dry	Gas Effect	ive October 1,	1986	
DESCRIPTION OF WELL AN Remuda Basin Unit	I HELL HOLI I AM	Name, including For Muda - Wolfc	anton	Kind of Lease State, Federal or Fee	State	Lease No. E-5894-1
	980	South	1980	Feet From The	East	b sa
Unii Letter;;	Feet From Th 23S	• 29		m, Fddy		County
Line of Section 27 To	wmship					
I. DESIGNATION OF TRANS	PORTER OF OIL	AND NATURAL	GAS		of this form is to	he senti
				to which approved copy		
Texaco Trading & Iran	sportation in	- T030-0011	P.O. BOX 6196 Address (Give address	, MICLANC, TEXA s to which approved copy	of this form is t	D De senti
lame of Authorized Transporter of C					Post	<u>ID-3</u>
None	Unit Sec.	Twp. Rge.	is gas actually conner	cted? When	10.	-3-86 14. PFR
i well produces oil or liquids, ive location of tanks.	J 24	23S 29E	No		Chg_	IT: PER
this production is commingled w	with that from any ot	her lesse or pool,	give commingling or	ier number:		
OTE: Complete Parts IV and	l V on reverse side	if necessary.				
the second se			OIL	CONSERVATION	-	
I. CERTIFICATE OF COMPLIANCE			CED 90 1986			

hereby certify that the rules and regulations of the Oil Conservation Division have een complied with and that the information given is true and complete to the best of hy knowledge and belief.

(Signalwe)

District Administrative Supervisor

(Tule) September 26, 1986 (Dece)

APPROVED	SEP 30 1986	
	Original Signed By	
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 deepener well, this form must be accompanied by a tabulation of the deviat______ tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allcaable 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 multipay completed wells.