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·	RECEIVED BY	х <sup>1</sup> - Х		
	JUL 18 1986	•		
STATE OF NEW MEXICO ENERGY AND MINERALS CEPARTMENT	O. C. D.			Form C-104
<b>po. or torico otterico</b>	ARTESIA OFFICE			Revised 10-01-78 Format 06-01-83
	OIL CONSERVA			Page 1
PILE V	SANTA FE, NEW			
LAND OFFICE				
TRANSPORTER CIL P	REQUEST FOR	ALLOWABLE		
OPERATOR	AN		AL GAS	
PROMATION OFFICE	AUTHORIZATION TO TRANSPO	JRT UIL AND NATUR		
1. Operator	/			• <i>-</i>
Texaco Producing Inc. "	, 			
P.O. Box 728, Hobbs, N	ew Mexico 88240			
Reason(s) for filing (Check proper box)		Other (Please	explain)	
New Well	Change in Transporter of:	Gas Effectiv	e August 1, 1986	5
Recompletion		densate	en la service de la servic	· · · · · · · · · · · · · · · · · · ·
Change in Cwnership				. •
If change of ownership give name and address of previous owner		<u> </u>	••••••••••••••••••••••••••••••••••••••	
IL DESCRIPTION OF WELL AND I	EASE Weil No.   Pool Name, Including Fo	rmation	Kind of Lease	Lease No.
BD Federal	1 Brushy Draw Del	1	State, Federal or FeeFed	leral NM-41645
			F	last
Unit Letter A 990	Feet From The NorthLine	and <u>880</u>	Feet From The	
26	hin 265 Range	29E , NMPM.	Eddy	. County
t Line of Section				
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL	GAS Aggings (Give address &	o which approved copy of 1	his form is to be sent)
Nome of Authorized Transporter of CII		D.O. Port 159	Artogia NM 88	2210
Navajo Refining Company Name of Authorized Transporter of Casing	nead Gas 🕅 or Dry Gas 🗌	Acdress (Give address t	o which approved copy of t	this form is to be sent;
Conoco, Inc.		P.O. BOX 120	7, Ponco City, (	JK 74003
If well produces oil or liquids,	A 26 26 29	Yes	11-18	3-85 Post ID-3
give location of innes. If this production is commingled with	the form any other lease or pool.	give commingling order	number:	8-1-86
If this production is commingled with	That from any other reasons	-		chg LT: SOC
NOTE: Complete Parts IV and V	on reverse side if necessary.		ONSERVATION DIV	
VI. CERTIFICATE OF COMPLIAN	CE			
and environment of the Oil Conservation Division have		APPROVED	JUL 30 1986	
I hereby certify that the rules and regulations of the one complete to the best of been complied with and that the information given is true and complete to the best of my knowledge and belief.		BYOriginal Signed By		
		Les A. Clements		
, 11		TITLE		
Atil Barrie	•		when the allowable for a	newly drilled or deepens.
(Signatu	•	well, this form mus	t be accompanied by a well in accordance wit	h AULE 111.
Dist. Admin. Sup. (Tule)		All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
July 16, 19		well name or number	r, or transported of othe	VI for changes of comer r such change of condition
(D2:4	•	Separate Form	s C-104 must be filed	for each pool in multip.

completed .