

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Texaco Producing Inc.		
Address	P.O. Box 728, Hobbs, New Mexico 88240		
Reason(s) for filing (Check proper box)	Other (Please explain)		
<input type="checkbox"/> New Well	Change in Transporter of:	Gas Transporter Name Change	
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil		
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Coastinghead Gas		
	<input type="checkbox"/> Dry Gas		
	<input type="checkbox"/> Condensate		

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Central Vacuum Unit	32	Vacuum Grayburg San Andres	State, Federal or Fee State	B-1414-1
Location	Unit Letter <u>P</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u>			
Line of Section	Township	Range	County	
30	17S	35E	Lea	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Mobile Pipe Line Company Texas New Mexico Pipe Line Co. (0095-0799)	P.O. Box 900, Dallas, Texas 75221 P.O. Box 2528, Hobbs, New Mexico 88240					
Name of Authorized Transporter of Coastinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips 66 Natural Gas Co. Texaco Inc.	4001 Penbrook, Odessa, Texas 79762 P.O. Box 728, Hobbs, New Mexico 88240					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Trp.	Range	Is gas actually connected?	When
	E	31	17S	35E	Yes	8/1/79

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.

A. W. Bowring
(Signature)
District Administrative Supervisor
(Title)
March 20, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 7 - 1986, 19 _____
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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 deviatoric 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.

RECEIVED
APR 2 - 1986
G.C.P.
GRASS OFFICE