STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	. 17		
DISTRIBUTION			
BANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	DIL		
	DAS		
OPERATOR			
PROBATION 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

[. Operator				
	•			
TEXACO Producing Inc.				
P. O. Box 728, Hobbs, New Mexico 88240				
Keason(s) for liling (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:	Change of Operator from Getty to			
Recompletion Oil	TEXACO Producing Inc. 12/31/84			
Change in Ownership Castaghead Gas	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				
Hobbs T 14 Chaveroo	San Andres State K-1369			
Location				
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East				
Line of Section 35 Township 7S Range	33E , NMPM, Roosevelt County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS [New of Authorized Transporter of City of Condensate] Address (Give address to which approved copy of this form is to be sent)				
Kame of Additionated Hampborton of the Paris Communication of the Paris Com				
Mobil Pipeline Company Name of Authorized Transporter of Casinghed Gas () or Dry Gas ()	P.O. Box 900, Dallas, Texas 75221 Address (Give address to which approved copy of this form is to be sent)			
one of Authorities Trensporter of State				
Cities Service Oil &Gas Corp.	100			
If well produces oil or liquids,	Yes 6/6/66			
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.				
OH CONSERVATION DIVISION				
VI. CERTIFICATE OF COMPLIANCE	6/1 85			
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED			
been complied with and that the information given is true and complete to the best of my knowledge and belief.				
				TITLE DISTRICT I SUFERVISOR
W. D. La This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepe				
			(Sizeaure) well, this form must be accompanied by a tabulation of the devia	
District Operations Manager	tests taken on the well in accordance with RULE 111.			
(Tule)	All sections of this total mast of this total mast of this total mast of the section of the sect			
March 25. 1985 Fill out only Sections I. II. and VI for changes of owner				
(Date)	well name or number, or transporter, or other such change of condition.			
Separate Forms C-104 must be filed for each pool in multip				

MAY 31 1985