STATE OF NEW MEXICO	ENT				Form C-104 Revised 10-01-78
		AN AGNOGRY ATION DIVISION			Format 05-01-83 Page 1
SANTA PE	GIE CONSERVATION DIVISION				
PLC					
SANTA FE, NEW MEXICO 87501					
LAND OFFICE					-
TRANSPORTER DIL GAS		REQUEST FOR	ALLOWABLE		
OPERATOR		AN	ID	-	
PROMATION OFFICE	AUTHOR	IZATION TO TRANSP	ORT OIL AND NATU	RAL GAS	
Ι.					
Operator			•	•	
TEXACO Producing Inc.	<u> </u>	<u> </u>			
P. O. Box 728, Hobbs,	New Mexico	88240			
Reeson(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of:			of Operator from		
Recompletion	011	Dry	Gas TEXACO	Producing Inc.	12/31/84
X Change in Ownership	Casir	nghead Gas 🚺 Cor	ndensate		
II. DESCRIPTION OF WELL A	ND LEASE	Pool Name, Including Fo	rmation	Kind of Lease	Lease No.
Hobbs T	18	Chaveroo S		State, Federal or Fee St	ate <u>K-1369</u>
Location . Unit Letter;	660 Feel Fro	The South Line	1980	Feet From The East	<u> </u>
Line of Section 35	Township 75	Range 3	3Е , имрм	Roosevelt	County
III. DESIGNATION OF TRAN	SPORTER OF		GAS	o which approved copy of 1	this form is to be sent)
Name of Authorized Transporter of C Mobil Pipeline Con	mpany	ondensate	P.O. Box 90	0, Dallas, Tex	xas 75221
Name of Authorized Transporter of C Cities Service Oil	Casinghead Gas A 1 & Gas Co	or Dry Gas [] Orp.	P.O. Box 30	0, Tulsa, OK 7	
If well produces oil or liquids, give location of tanks.	G 3		ls gas actually connect Yes	Man When	/ €. / 66
If this production is commingled t	with that from an	y other lease or pool, g	rive commingling orde	number:	
NOTE: Complete Parts IV and					

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VI. CERTIFICATE OF COMPLIANCE

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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.

W. D.

(Signature)

District Operations Manager (Tule)

March 25, 1985

(Dose)

OIL CONSERVATION DIVISION	
APPROVED 6/1 , 19 85	
y Jun Solon	
DISTRICT I SUFERVISOR	

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepende well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with HULE 111.

All sections of this form must be filled out completely for allow able 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.

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