| STATE OF NEW MEXICO | INT | | | | Form C-104 Revised 10-01-78 | | |
|--|---------------------------|----------------------------|---------------------|----------------------------|--------------------------------|----------|--|
| B. P. International States and St | | | | | Format 06-01-83 | | |
| DISTRIBUTION | OIL CONSERVATION DIVISION | | | | | Page 1 | |
| BANTA PE | | P. O. BOX 2088 | | | • | | |
| PILE | | SANTA FE, NEW MEXICO 87501 | | | | | |
| V.1.0_1. | | SANTA PE, NEW | | | • | | |
| LAND OFFICE | • | | | | | | |
| TRANSPORTER OIL OIL | | REQUEST FOR ALLOWABLE | | | | | |
| OPERATOR | | | ND | | | | |
| PROMATION OFFICE | AUTHOR | IZATION TO TRANSF | PORT OIL AND NA | TURAL GAS | | | |
| I. | | | | | | | |
| Operator | | | | | | | |
| TEXACO Producing Inc. | | | | | <u></u> | <u> </u> | |
| Address | | | | | | | |
| P. O. Box 728, Hobbs, | New Mexico | 88240 | | | | | |
| Reeson(s) for filing (Check proper b | | | Other (Ple | ase explain) | | | |
| Reeson(s) for filing (Check proper a | ••• / | Transporter of: | Change | e of Operator fro | om Getty to | | |
| New Vell | _ | | m ny nov | Producing Inc. | 12/31/84 | | |
| Recompletion | 011 | | , | | | | |
| X Change in Ownership | Costr | ngheod Gas C | ondensate | | | | |
| If change of ownership give name and address of previous owner | | | <u></u> | | | | |
| II. DESCRIPTION OF WELL A | ND LEASE | | | Kind of Lease | | | |
| Lease Name | Well No. | Fool Name, Including F | ormation | 1 | | 9424 | |
| Hightower "19" State | 2 1 | Hightower Up | pen Penn East | State, Federal or Fee | | | |
| Location P Unit Letter : | 660 Feat Fre | South Li | 660 | Feel From The | l ast | | |
| 10 | Township 12 | 25 Range | 34E , NA | ирм, Lea | | Coun | |
| III. DESIGNATION OF TRAN | SPORTER OF | OIL AND NATURA | LGAS | ess to which approved copy | of this form is to be si | ent) | |
| Name of Authorized Transporter of | OII A OT C | Condensate | | IST IO WAICH Approved COPT | my 70702 | • | |
| TEXACO Trading & Tra | ansp. Co. | | P.O. Box | x 1142, Midland, | 17 19102 | | |
| TENALU ITAULINY & ITA | | | Address (Give addre | ess to which approved copy | of this form is so be so | ent) | |
| Name of Authorized Transporter of | Cosinghead Gas 12 | or Dry Gas | DO RO | x 1589, Tulsa, O | K 74102 | | |
| Warren Petroleum Com | rp. | | 1.0.10. | | •••••••••••••••••••••••••••••• | | |

Ree.

34E

Is gas actually connected?

Yes

If this production is commingled with that from any other lease or pool, give commingling order number:

Two.

12S

.

Sec.

· 19

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

If well produces oil or liquids,

give location of tanks.

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.

Unit

i P

W.B.

(Signature) District Operations Manager (Tule) April 16, 1985

(Date)

OIL CONSERVATION DIVISION 6/1 19 85 APPRO B DISTRICT I SUFERVISOR TITLE

When

2/2/84

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

If this is a request for allowable for a newly drilled or deeper 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 all able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi

Separate Forms C-104 must be filed for each pool in multi; completed wells.