STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.S.O.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE		1	

OIL CONSERVATION DIVISION P. O. EOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE	
AND	
ALITHOPIZATION TO TRANSPORT OIL AND NATURAL GA	S

OPERATOR AN	D ODT OU AND NATURAL GAS		
AUTHORIZATION TO TRANSPO	JRT OIL AND NATURAL OF		
Operator			
TEXACO Producing Inc.			
P. O. Box 728, Hobbs, New Mexico 88240			
Reason(s) for filing (Check proper box)	Other (Please explain) Change of Operator from Getty to		
New Well Change in Transporter of:	meyaco producing Tra 12/31/84		
Recompletion	densate		
Change in Ownership Casinghead Gas Cor			
If change of ownership give name	$-\alpha$		
and address of previous owner	A form of 11kber tour X-1222		
II. DESCRIPTION OF WELL AND LEASE Jall Marie, Including Fo	traction King of Lease No		
Mexico "R" 2 Eideon Penn	Storte, Federal or Fee State B9970		
Location	1980 East		
Unit Letter : 660 Feet From The North Line	andFeet From The		
IO ~ . FOD Range	35E , NMPM, Lea County		
Line of Section Township TOD Range			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Off [22]	P.O. Box 2528, Hobbs, N.M. 88240		
Texas N.M. Pipeline Co. (Co75-03/8) Name of Authorized Transporter of Casinghead Gas (A) or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
Warren Petroleum Corp.	P.O. Box 1589, Tulsa, OK 74102		
Unit Sec. Twp. Rge.	is gas actually connected? When Yes Unknown		
nive location of tanks.	1		
If this production is commingled with that from any other lease or pool,	give comminging order number.		
NOTE: Complete Parts IV and V on reverse side if necessary.			
	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	APPROVED 6/1, 19 85		
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	- June Solton		
my knowledge and belief.	BY		
•	TITLE DISTRICT 1 SUFERVISOR		
w.B. hh	This form is to be filed in compliance with RULE 1104.		
If this is a request for allowable for a newly dril well, this form must be accompanied by a tabulation with the second party of the second party			
(Signature)	If tests taken on the well in accordance with note it.		
District Operations Manager (Tule)	All sections of this form must be filled out completely for all able on new and recompleted wells.		
April 26, 1985	If my and continue to the and VI for changes of own		
(Date)	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.		