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OPERATION OF THE   AND     AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS     Image: Authorized Transporter of Client Not	TRANSPORTER		REQUEST	FOR ALLOW	ABLE		
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Address     P. O. Box 728, Hobbs, New Mexico 88240     Receive(s) for filing (Check proper box)     New Well     Change in Transporter of:     Recompliation     Oil     Dry Gas     Commes in Ownership     Condensate     It change of ownership give name     and address of previous owner     II. DESCRIPTION OF WFH, AND IEASE     Leves Name     I.ovington Paddock Unit     18     Lowington:     Peet From Th     Leves Name     Leves Name     Value of Section     Becomplation     I.ovington:     Peet From Th     I.eves Name     Veril No.     Peet From Th     I.eves Name     Veril Letter     H     :   2310     Feet From Th     Line of Section     35   Township     IOS   Range     Address (Give address to whick approved copy of this form is to be senif     Terese Name   P.O. Box 2528, Hobbs, N.M. 88240     Texas-NM Pipeline Co. (0095-0512)	Operator						
Address     P. O. Box 728, Hobbs, New Mexico 88240     Recien(s) for filing (Check proper box)     New Well     Change in Transporter of:     Recompletion     Oil     Dry Ges     Commes in Ownership     Costinghead Ges     Condensate     Mit change of ownership give name     and address of previous owner     II. DESCRIPTION OF WELL AND IFASE     Levies Name     Lowington Paddock Unit   18     Lowington:   Heil No. Pool Nome, inclusion formation     Store, Feel From The   East     Lowington:   H     Lowington:   2310     Feel From Th   Line and     330   Feel From The     East   Count     Unit Letter   H     Line of Section   35     Township   or Condensate     Name of Authorized Transporter of Cill   or Condensate     P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Cesinghead Ges   or Dry Ges     Name of Authorized Transporter of Cesinghead Ges   or Dry Ges     Name of Authorized Transporter of Ce	TEXACO Producing Inc						
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X Change in Ownership   Casinghead Gas   Condensate     If change of ownership give name and address of previous owner   It change of ownership give name     III. DESCRIPTION OF WT!! AND LEASE   It is in a first interfermation   Kind of Lease     Lease Name   Well No.   Fool Name, it is is a firmation   Kind of Lease     Lowington Paddock Unit   18   Lovingtor. Paddock   State   E-1678-1     Locenton   H   :   2310   Feet From The North   Line and   330   Feet From The East     Line of Section   35   Township   16S   Range   36E   NMPM,   Lea   Count:     III. DESIGNATION OF TRANSPORTER OF OIL AND NATUPAL GAS   It and counts of Condensate   Assister (Give address to which approved copy of this form is to be senif)   Texas-NM Pipeline Co.   (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be senif)     Phillips Petroleum Company   4001 Penbrook, Odessa, Texas 79762   Wen   It age citually connecied?   Wen   It age citually connecied?   Wen			•				
Image in Ournership give name and address of previous owner     II. DESCRIPTION OF WELL AND LEASE Lease Name Iovington Paddock Unit   Well No. Fool Name, including fixmation Vell No. Fool Name, including fixmation Iovington Paddock Unit   Kind of Lease State   Lease No. E-1678-1     Lease Name Lovington Paddock Unit   18   Iovingtor, Paddock   State   E-1678-1     Lease Name Lovington Paddock Unit   18   Iovingtor, Paddock   State   E-1678-1     Lease Name Local Name Local Name   H   2310   Feet From ThNOrth   Line and   330   Feet From The   East     Unit Letter   H   2310   Feet From ThNOrth   Line and   36E   NMPM,   Lease   Count     III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Address (Groe address to which approved copy of this form is to be sent)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorised Transporter of Oll Company   or Dry Gas   Address (Groe address to which approved copy of this form is to be sent)     Name of Authorised Transporter of Casinghead Gas   or Dry Gas   Address (Groe address to which approved copy of this form is to be sent)     Name of Authorised Transporter of Casinghead Gas   or Dry Gas   Address (Groe address to which approved copy of this form is to be sent)     Name of Authorised Transporter of Casi			ſ	Dry Gas	TEXACO	Producing Inc.	12/31/84
Lovington Paddock Unit   18   Lovingtor: Paddock   Store, Federal or Fee State   E-1678-1     Locention   Unit Letter   H   2310   Feet From Th   Line and   330   Feet From The   East     Line of Section   35   Township   16S   Range   36E   NMPM,   Lea   Count     II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Address (Give address to which approved copy of this form is to be seni)     Name of Authorized Transporter of Oil & or Condensate   Address (Give address to which approved copy of this form is to be seni)     Name of Authorized Transporter of Casinghead Gas or Dry Gas   Address (Give address to which approved copy of this form is to be seni)     Name of Authorized Transporter of Casinghead Gas or Dry Gas   Address (Give address to which approved copy of this form is to be seni)     Name of Authorized Transporter of Casinghead Gas or Dry Gas   Address (Give address to which approved copy of this form is to be seni)     Phillips Petroleum Company   Unit   Sec.   Twp.   Reg.   Is gas actually connected?   When     If well produces of or liquids,   Unit   Sec.   Twp.   Reg.   Is gas actually connected?   When	Recompletion Change in Ownership Change of ownership give name		[	==; `	TEXACO	Producing Inc.	12/31/84
Lovington Paddock Unit   18   Lovington Paddock     Locetion   H   2310   Feet From TheNorth   330   Feet From The East     Line of Section   35   Township   16S   Bange   36E   NMPM,   Lea   Count:     III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of OIL and or Condensate   Address (Give address to which approved copy of this form is to be sent)   Texas-NM Pipeline Co.   (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)	Recompletion       Recompletion       I Change in Ownership       If change of ownership give name       and address of previous owner       II. DESCRIPTION OF WELL AND	Casin	igh <del>eod</del> Gas [	Condensale	TEXACO		
Unit Letter   H   2310   Feet From The   East     Live of Section   35   Township   16S   Range   36E   , NMPM,   Lea   Countribution     III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of OIL & or Condensate   Andreas (Give address to which approved copy of this form is to be sent)   Texas-NM Pipeline Co.   (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Addreas (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Addreas (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Addreas (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Addreas (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Addreas (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     If well produces oil or liquids,   Unit   Sec.   Twp.   Rge.	Recompletion       Recompletion       I Change in Ownership       If change of ownership give name       and address of previous owner       II. DESCRIPTION OF WELL AND	D LEASE	Fooi Nanie, incod		TEXACO	Kind of Lease	Leose No
Line of Section   35   Township   105   Hange   SOL   , tune mi     III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS     Name of Authorized Transporter of OIL & or Condensate   Address (Give address to which approved copy of this form is to be sent)     Texas-NM Pipeline Co.   (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Phillips Petroleum Company   4001 Penbrook, Odessa, Texas 79762     If well produces oil or liquids,   Unit   Sec.   Twp.   Rge.     If well produces oil or liquids,   D   1 175   36F   Yes   I	Recompletion       Recompletion       It change in Ownership       If change of ownership give name       If change of ownership give name       II. DESCRIPTION OF WELL AND       Lease Name	D LEASE	Fooi Nanie, incod		TEXACO	Kind of Lease	Leose No
Name of Authorized Transporter of Clil Concensate   or Condensate   Address (Clive address to which approved copy of this form is to be sent)     Texas-NM Pipeline Co. (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Casinghead Casing or Dry Casing   Address (Clive address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Casing   or Dry Casing   Address (Clive address to which approved copy of this form is to be sent)     Phillips Petroleum Company   Unit   Sec. Twp. Rege.   Is gas actually connected?   When     If well produces oil or liquids,   D. J. 175 + 36E   Yes   I	Recompletion Recompletion Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Lesse Name Lovington Paddock Unit Location H 21	D LEASE Well No. 18	Poor None, inc.	Condensate	<u></u>	Kind of Lease Stole, Federal or Fee St	Leose No
Name of Authorized Transporter of Cill S   or Condensate   Address (Cibe address to which approved copy of this form is to be sent)     Texas-NM Pipeline Co. (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Cosinghead Cas2   or Dry Cas     Address (Cibe address to which approved copy of this form is to be sent)     Phillips Petroleum Company   4001 Penbrook, Odessa, Texas 79762     If well produces oil or liquids,   Unit     Sec.   Twp.     Rge.   is gas actually connected?     When   1 + 175	Recompletion Recompletion Schange in Ownership If change of ownership give name If change of ownership give name If DESCRIPTION OF WELL ANI Lecose Name Lovington Paddock Un: Location Unit Letter H : 2: 25	D LEASE Well No. 18 310_Feet From	Poor Norre, inc.	Condensate	30	Kind of Lease Stote, Federal or Fee St Feel From TheEast	ate E-1678-
Texas-NM Pipeline Co. (0095-0512)   P.O. Box 2528, Hobbs, N.M. 88240     Name of Authorized Transporter of Cosinghead Gas2 or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Cosinghead Gas2 or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Phillips Petroleum Company   4001 Penbrook, Odessa, Texas 79762     If well produces oil or liquide,   Unit     Sec.   Twp.     Rge.   is gas actually connected?     When   1 + 175 + 36E	Recompletion Recompletion Schange in Ownership Schange of ownership give name If change of ownership give name If the second section Section 35 Tow	D LEASE Well No. 18 310 Feet From mahip 16S	Fooi Name, interest Lovington 1 m The North Range	Condensate	30 , NMP	Kind of Lease Stote, Federal or Fee St Feel From TheEast M,Ea	ate E-1678- Count
Name of Authorized Transporter of Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)     Phillips Petroleum Company   4001 Penbrook, Odessa, Texas 79762     If well produces oil or liquids,   Unit   Sec.   Twp.   Rgs.   Is gas actually connected?   When	Recompletion Recompletion Section H. DESCRIPTION OF WELLANI Lovington Paddock Uni Lovington Paddock Uni Location H	D LEASE it 18 310 Feet From mahip 16S PORTER OF C	Poor Name, inc. Foor Name, inc. Lovington 1 m ThNorth Range DIL AND NATE	Condensate Cond Condensate Conden	30 , NMP (Give address	Kind of Lease Store, Federal or Fee St Feel From The East M. Lea	ate E-1678- Count
Phillips Petroleum Company   4001 Penbrook, Odessa, Texas 79762     If well produces oil or liquids.   Unit   Sec. [Twp. Rgs. is gas actually connected?]     When   If well produces oil or liquids.   P	Recompletion Recompletion Second address of previous owner  Locate Name Lovington Paddock Unit Letter  Live of Section 35 Tow  II. DESIGNATION OF TRANSP Name of Authorized Transporter of Olit Texas-NM Pipeline Co.	D LEASE it 18 310 Feet From mahip 16S PORTER OF C 50005-0512	Fooi Name, inc. Fooi Name, inc. Lovingtor: 1 m The North Range DIL AND NATI DIL AND NATI )	Condensate	30 , NMP (Give acdress Вох 2528	Kind of Lease Store, Federal or Fee St Feet From The East M. Lea to which approved copy of the B. Hobbs, N.M. 882	ate E-1678- Count
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	Recompletion       Recompletion       Change in Ownership       If change of ownership give name       and address of previous owner       II. DESCRIPTION OF WELL AND       Lease Name       Lovington Paddock Unit       Location       Unit Letter       H       Live of Section       35       Town       III. DESIGNATION OF TRANSH       Name of Authorized Transporter of Oli       Texas-NM Pipeline Co.       Name of Authorized Transporter of Case	D LEASE Well No. 18 310 Feet From mahip 16S PORTER OF C (0095-0512 Linghead Gas	Fooi Name, inc. Fooi Name, inc. Lovingtor: 1 m The North Range DIL AND NATI DIL AND NATI )	Condensale Condensale Condensale Paddock Line and 3 36E URAL GAS Autress P.O. Address 4001	30 , NMP (Give address Box 2528 (Give address Penbrook	Kind of Lease Store, Federal or Fee St Feel From The East M. Lea Hobbs, N.M. 882 Hobbs, N.M. 882 Hobbs, N.M. 882	Lease No ate E-1678- Count Nic form is to be senif 40 Nis form is to be senif

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.

•-~

W. D. hh (Signature)

District Operations Manager (Tule)

April 10, 1985

(Date)

OIL CONSERVATION DIVISION	
APPROVED June 1,	<b>19</b> <u>85</u>
By June Section	
TITLE 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 deepenr well, this form must be accompanied by a tabulation of the deviatic tests taken on the well in accordance with RULE 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 multipart completed wells.

