STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

(Date)

DG. DE COPIES DES	1 100 4 4	
DISTRIBUTE		
SANTA FE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRAMIPORTER	OIL	
	BAD	
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

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

REQUEST FOR ALLOWABLE

PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
I.							
TEXACO Producing Inc. Address P. O. Box 728, Hobbs, New	Mexico 88240		 —	<u> </u>			
Resson(s) for filing (Check proper box)	Other (Please explain)						
New Well	Change in Transporter of:		Change of Operator from Getty to TEXACO Producing Inc.12/31/84				
Recompletion	Ott	=	, , , , , , , , , , , , , , , , , , , ,			04	
X Change in Ownership	Costnghead Gas	Con	densate				
If change of ownership give name and address of previous owner							
II. DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, Inc	Indian For	rmallon		Kind of Lease	· · · · · · · · · · · · · · · · · · ·	Lease No.
Lease Name	31 Lovingto				State, Federa. c: Fee	State	B7766-8
Lovington Paddock Unit L 1650	South			890	Feet From The We	est	
Unit Letter:					- -		
Line of Section 36 Townsh	16S Re	ange	36	, NMPM	. Lea		County
Mane of Authorized Transporter of Costinghed Gas or Dry Gas Address (Give address to which approved copy of this form as to be a Phillips Petroleum Company Name of Authorized Transporter of Castinghed Gas or Dry Gas Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which approved copy of this form as to be a Address (Give address to which appr							
If well produces oil or liquids, give location of tanks.	3 1 17S	36E	Y	es			
If this production is commingled with the	hat from any other lease	or pool,	zive com	ningling orde	r number:		
NOTE: Complete Parts IV and V or	n reverse side if necessa	ry.					
OIL CONSERVATION DIVISION							
VI. CERTIFICATE OF COMPLIANC 1 hereby certify that the rules and regulations of been complied with and that the information grown knowledge and belief.	of the Oil Conservation Divis iven is true and complete to th	sion have ne best of	APPR BY	DISTRI	ne 1,		. 19 85
(Signature) District Operations Manager (Tule)			If well, t tests t Al able or	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells.			
April 10, 1985				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.			

MAY 81 1985