STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.S.O.A.			
LAND OFFICE			
TRANSPORTER	DIL		
	UAB		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
I.		
Operator	•	
TEXACO Producing Inc.		
P. O. Box 728, Hobbs, New Mexico 88240		
Resson(s) for filing (Check proper box)	Other (Please explain)	
	Change of Operator from Getty to	
	TEXACO Producing Inc. 12/31/84	
	ndensale	
[X] Change in Other		
If change of ownership give name		
and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE	i Kind of Lease Lease No.	
Lease Name	Stone Federal of Fee	
H.T. Montieth "B" 1 Lovington Penn	Northeast State, 7 sarrai of Fee	
Location	******	
Unit Letter C : 660 Feet From The North Line	e and 2334 Feet From The West	
Onit Later	Lea County	
Line of Section 19 Township 16S Range	37E . NMPM,	
The state of the s		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	[Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of GII X: or Condensate	D.O. Poy 1510 Midland TX 79702	
Texas N.M. Pipeline Co. (0095-0273)	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized . ranaparter 5. Cauthy	4001 Penbrook, Odessa, TX 79762	
Phillips Petroleum Co.	Is gas actually connected? When	
If well produces oil or liquids,	Yes 10/1/71	
nive location of tents.		
If this production is commingled with that from any other lease or pool,	give comminging order names	
NOTE: Complete Parts IV and V on reverse side if necessary.		
NOTE: Complete Paris II and	OIL CONSERVATION DIVISION	
VI CERTIFICATE OF COMPLIANCE		
1)· / 1 / 2 / 4 / 4 / 5 / 4 / 4 / 5 / 5 / 5 / 5 / 5		
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.	H T	
	TITLE DISTRICT I SUFERVISOR	
w. b. hh	11	
418 hh	This form is to be filed in compliance with RULE 1104.	
	If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation	
(Signature)	i tests taken on the well in accordance with RULE :: .	
District Operations Manager	All sections of this form must be filled out completely for allow	
April 29, 1985 (Tule)	able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owns	
(0	well name or number, or transporter, or ciner such thangs of the	
(Date)	Separate Forms C-104 must be filed for each pool in multip	
	completed wells.	