STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

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#01 TV 61 P 7 21 @			
5447A FE			
FILE			
U.S.O.A.			
LAND OFFICE			
TRAMSPORTER	OIL		
	VAS		
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

Operator							
TEXACO Producing Inc.							
P. O. Box 728, Hobbs, New	Mexico 88240						
Reason(s) for filing (Check proper box) New Well	Change in Transporter		Change of Operator from Getty to TEXACO Producing Inc. 12/31/84				
Recompletion X Change in Ownership	Casinghead Gas	=	ondens ate		_		
f change of ownership give name and address of previous owner							
I. DESCRIPTION OF WELL AND LE	ASE Well No. Fooi Name, I	lacinates i	r mailan	i Kina of Lease	Leges Nc.		
Losse Name Torrington Can Andrea Unit	23 Lovingto			Sicre, Federal or Fee State	B7896		
Lovington San Andres Unit	- DOVERIGE	OII Dali	·				
Unit Letter M : 660	Feet From The SOU	ith Lin	• and 900	Feet From The West			
21	160	2'	7E , NMPN	, Lea	County		
Line of Section 31 Township	, 105	Range 3	, pare	· · · · · · · · · · · · · · · · · · ·			
Name of Authorized Transporter of Oil & Texas-NM Pipeline Co. (009	er Condensate	ATURAI	P.O. Box 2528	to which approved copy of this form to, Hobbs, N.M. 88240			
Name of Authorized Transporter of Casinghead Gas a Dry Gas Addres				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, give location of tanks.	1 17S	36E	Yes				
I this production is commingled with the	it from any other leas	e or pool,	give commingling orde	r number:			
NOTE: Complete Parts IV and V on							
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION				
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.			APPROVED_Ju	ne 1, /	_, 19 <u>85</u>		
			BY James Section				
			TITLE DISTRICT I SUFERVISOR				
w.B. hh			This form is to	be filed in compliance with RU	LE 1104.		
W. D. Commen			If this is a req	uest for allowable for a newly dr t be accompanied by a tabulation well in accordance with RULE	illed or deepened t of the deviation		
District Operations Manage	er		All sections of able on new and re	this form must be filled out com	pletely for allow-		
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.				
(Date)			Separate Forms C-104 must be filed for each pool in multiply completed wells.				
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