

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF TOWNSHIPS COVERED	
DISTRICT	
SANTA FE	
FILE	
U.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Texaco Producing Inc.

Address
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

Other (Please explain)
Gas Transporter Name Change

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State O	Well No. 14	Pool Name, including Formation Lovington Abo	Kind of Lease State, Federal or Fee	Lease No. B7896
Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>31</u> Township <u>16S</u> Range <u>37E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas N.M. Pipeline Co. (0095-0240)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM, 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX, 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. J 31 16S 37E
Is gas actually connected?	When Yes Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

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.

A. W. Browning
(Signature)
District Administrative Supervisor
(Title)
March 20, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 23 1986, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

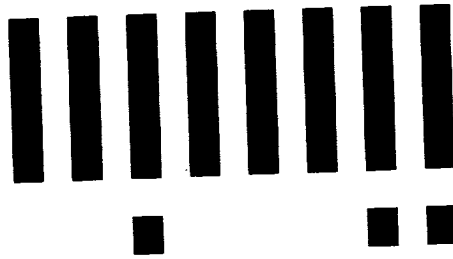
This form is to be filed in compliance with RULE 1104.

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.

Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of conditions.

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



LTR



Job separation sheet

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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Formal 06-01-83
Page 1

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SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT
OPERATOR	
PROMOTION OFFICE	

Operator

TEXACO Producing Inc.

Address

P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

- ☐ New Well
☐ Recompletion
☒ Change in Ownership

Change in Transporter of:

- ☐ Oil ☐ Dry Gas
☐ Castinthead Gas ☐ Condensate

Other (Please explain)

Change of Operator from Getty to
TEXACO Producing Inc. 12/31/84

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "O"	Well No. 14	Pool Name, including Formation Lovington Abo	Kind of Lease State, Federal or Fee State	Lease No. B7896
Location Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line of Section 31 Township 16S Range 37E NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas N.M. Pipeline Co. (0095-0240)	P.O. Box 2528, Hobbs, N.M. 88240
Name of Authorized Transporter of Castinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	4001 Penbrook, Odessa, TX 79760
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	J 31 16S 37E Yes Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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. B. L. L.

(Signature)

District Operations Manager

April 30, 1985

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1 19 85

BY *[Signature]*
TITLE DISTRICT 1 SUPERVISOR

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well name or number, or transporter, or other such change of condition.

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