STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

D4. DF 10044 016	1440		
DISTRIBUTION			
SANTA PE			
FILE			
U.S.Q.4,			
LANG OFFICE			
TRAMIPORTER	OIL		
	· At		
OPERATOR			
PROMATION OFFICE			

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.				
Operator	•			
TEXACO Producing Inc.				
P. O. Box 728, Hobbs, New Mexico 88240				
Reason(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			
Change in Ownership Casinghead Gas	ondensate			
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Foot Name, Including	ormation Kind of Lease Lease No.			
Lovington San Andres Unit 19 Lovington San	Andres Store, Fodero cr Foo State B7897			
M 330 West Unit Letter : Feet From The Lit	660 South			
Line of Section Township Range	37E Léà County			
Cine of Section				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oll Condensate Address (Give address to maich approves copy of this joint is to de stary				
Texas-NM Pipeline Co. (0095-0512) P.O. Box 2528, Hobbs, N.M. 88240 Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas Cor Dry Gas Phillips Petroleum Company	4001 Penbrook, Odessa, Texas 79762			
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rgs. 1 17S 36E	Is gas actually connected? When Yes			
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	OIL CONSERVATION DIVISION			
hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED June 1, 19 85				
been complied with and that the information given is true and complete to the best of				
ny knowledge and belief.	BY			
•	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 dee				
District Operations Manager	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow			
(Tule)	able 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.			
(Date)	Separate Forms C-104 must be flied for each pool in multiply completed wells.			

MAY 31 1985