

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF SPONSORS DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator

TEXACO Producing Inc.

Address

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

Reason(s) for filing (Check proper box)		Other (Please explain)	
<input type="checkbox"/> New Well	Change in Transporter of:	Change of Operator from Getty to	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	TEXACO Producing Inc. 12/31/84	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas	
		<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State P	3	Lovington Abo	State, Federal or Fee State	B7897
Location				
Unit Letter	M	800	Feet From The South	Line and 330
			Feet From The West	
Line of Section	32	Township	16	Range 37
				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. (0095-0256)	P.O. Box 2528, Hobbs, N.M. 88240
Name of Authorized Transporter of Casinghead 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 Co.	4001 Penbrook, Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit M Sec. 32 Twp. 16 Rge. 37	Yes 10/1/71

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.

IV. 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 1985  
BY James L. L.  
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 condition.

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