

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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SANTA FE		
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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator ARCO Oil and Gas Company  
Division of Atlantic Richfield Company

Address P. O. Box 1710, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain) Effective 1/01/85 <u>Getty Trading and Transportation Co. nan</u> <u>changed to: Texaco Trading and Trans-</u> <u>portation Company</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State 19</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Kemnitz Atoka Morrow South Gas</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>E-944</u>
Location Unit Letter <u>0</u> : <u>960</u> Feet From The <u>South</u> Line and <u>2130</u> Feet From The <u>East</u> Line of Section <u>19</u> Township <u>16S</u> Range <u>34E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

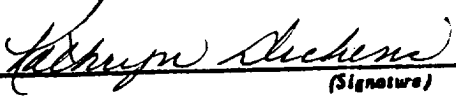
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texaco Trading and Transportation Company</u>	<u>P. O. Box 6196, Midland, Texas 79711</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Northern Natural Gas Company</u>	<u>P. O. Box 2370, Hobbs, New Mexico 88240</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>0</u> Sec. <u>19</u> Twp. <u>16</u> Rge. <u>34</u>	<u>Yes</u> <u>8/2/82</u>

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.

  
(Signature)  
Services Supv.  
(Title)  
1/14/86  
(Date)

OIL CONSERVATION DIVISION

**JAN 20 1986**

APPROVED \_\_\_\_\_, 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 deviated 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 multiple completed wells.

RECEIVED

JAN 17 1986

O.C.D.  
HOBBS OFFICE