

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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

Operator

Texaco Producing Inc.

Address

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

Reason(s) for filing (Check proper box)

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

Other (Please explain)

X show gas connection date

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name State P	Well No. 13	Pool Name, including Formation Lovington Grayburg-SA	Kind of Lease State, Federal or Fee State	Lease No.
Location				
Unit Letter J	1350	Feet From The South	Line and 2410	Feet From The East
Line of Section 32	Township 16S	Range 37E	NMPM, Lea	County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

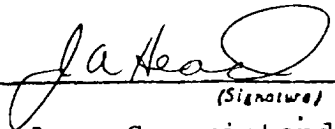
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co(0095-0294)	Address (Give address to which approved copy of this form is to be sent) PO Box 2528, Hobbs, New Mex. 88240					
Name of Authorized Transporter of Casinghead 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, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 32	Twp. 16	Rge. 37	Is gas actually connected? Yes	When 9-17-88

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.

I. 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) 397-3571  
Hobbs Area Superintendent  
(Title)  
11-10-88  
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 18 1988, 19  
ORIGINAL SIGNED BY JERRY SEXTON  
BY DISTRICT I SUPERVISOR  
TITLE \_\_\_\_\_

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 allow-  
able 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 multiply  
completed wells.