

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

DATE RECEIVED	
DISTRICT	
SANTA FE	
FILE	
U.S.B.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2086
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 05-01-83
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)
☐ New Well
☐ Recompletion
☒ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Gas
☐ Condensate
 Other (Please explain)
 Change of Operator from TEXACO INC. TO TEXACO PRODUCING INC. effective 6/1/85.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Central Vacuum Unit	Well No. 125	Pool Name, including Formation Vacuum Grayburg San Andres	Kind of Lease State, Federal or Fee State	Lease No. B-1306-1
Location Unit Letter <u>D</u> : <u>913</u> Feet From The <u>West</u> Line and <u>990</u> Feet From The <u>North</u> Line of Section <u>7</u> Township <u>18S</u> Range <u>35E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Mobil Pipe Line Company Texas N.M. Pipe Line Co. (0095-0799)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Dallas, TX 75221 P.O. Box 2528, Hobbs, N.M. 88240
Name of Authorized Transporter of Gas ☒ or Dry Gas ☐ Phillips Petroleum Co. TEXACO Inc.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762 P.O. Box 728, Hobbs, N.M. 88240
If well produces oil or liquids, give location of tanks. Unit <u>E</u> Sec. <u>31</u> Twp. <u>17S</u> Rge. <u>35E</u>	Is gas actually connected? <u>Yes</u> When <u>8/1/79</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.

W. B. L. L.
(Signature)

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 19 85
BY [Signature]
TITLE DISTRICT 1 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 all wells on new and recompleted wells.

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

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