STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT						Form C-104 Revised 10-01-	78
						Format 06-01-	-
DISTRIBUTION	0	OIL CONSERVATION DIVISION				Page 1	
		P, O. BO					
V.8.G.A.		SANTA FE, NEW	MEXICO 87	501		•	
LAND OFFICE							
TRANSPORTER DIL		REQUEST FOR	ALLOWABLE				
OPENATOA .			ND				
PRONATION OFFICE	AUTHOR	ZATION TO TRANSP	PORT OIL AND	NATURA	L GAS		
I.							
Operator							
TEXACO Producing Inc.							
P. O. Box 728, Hobbs, N	ew Mexico	o 88240					
Reeson(s) for filing (Check proper box)		Transporter of:	Other (Chai	(Please ex nge Of	Operator from	n Getty to	0
New Vell						17/21/0	4
	1 100		y Gas TEX	aco Pr	oducing Inc.	12/31/8	•
Recompletion		H H	• -	aco Pro	oducing Inc.	12/31/0	
Becompletion Change in Ownership		H	y Gas TEXi ondensate	ACO Pro	oducing Inc.		
Change in Ownership If change of ownership give name and address of previous owner	Cash	H H	• -				
Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND	Contraction	H H	ondens die		oducing Inc.		Lease No
Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Locase Name State AN	Contraction	ngheod Cas 🗍 Ca	ormalion	K		State	
Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Location T 23	D LEASE Well No. 5	Foo. Name, Including F	ormation Reef	K I Si	ind of Leose		Lease No
Change in Ownership If change of ownership give name and address of previous owner	D LEASE Well No. 5	Poor Name, Including F Vacuum Abo	ormation Reef	K I Si	ind of L e ase ats. Federai or Fee	State	Lease he
Y Change in Ownership If change of ownership give name and address of previous owner	Costin Costin D LEASE Veli No. 5 10 Feet From nahip 185	ngheod Gas Ca Foo. Nome, including F Vacuum Abo om The South Lin S Range	ormation Reef and 2310 35E ,	о NMPM,	ind of Lease are, Federal or Fee Feet From The Lea	<u>State</u> East	L
Change of ownership If change of ownership give name and address of previous owner	Contraction Contra	ngheod Gas Ca Foo. Name, Including F Vacuum Abo om The South Lin S Range OIL AND NATURAI	ormation Reef and 2310 35E ,	о NMPM,	ind of Lease are, Federal or Fee Feet From The Lea	<u>State</u> East	L
Y Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Location Unit Letter J 23 Line of Section 7 Tow III. DESIGNATION OF TRANSP	Contraction Contra	ngheod Gas Ca Foo. Name, Including F Vacuum Abo om The South Lin S Range OIL AND NATURAL	ormation Reef and 2310 35E , GAS	0 NMPM, 1010111	ind of Lease ate, Federal or Fee Feet From The Lea 	State East	Lease No #E7653 County
Y Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Leese Name State AN Location Unit Letter J 23 Line of Section 7 Tow III. DESIGNATION OF TRANSP Name of Authorized Transporter of Ci. Texas N.M. Pipelin	Cestin Cestin D LEASE Well No. 5 10 Feet From nahip 185 ORTER OF 0 Cor Concert	Prov. Nar.e, Including F Vacuum Abo Marthe South Lin B Range OIL AND NATURAL (20095-0498)	ormation Reef and 2310 35E , GAS	0 NMPM, 1010111	ind of Lease ate, Federal or Fee Feet From The Lea 	State East	Lease No #E7653 County
Y Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Location Unit Letter J 23 Line of Section 7 Tow III. DESIGNATION OF TRANSP	Cestin Cestin D LEASE Well No. 5 10 Feet From nahip 185 ORTER OF 0 Cor Concert	Prov. Nar.e, Including F Vacuum Abo Marthe South Lin B Range OIL AND NATURAL (20095-0498)	ormation Reef and 231(35E GAS Address (Give ad P.O. B(Address (Give ad	0 ммрм, сагезя со и ох 25 заблезя го и	Ind of Lease ate. Federal or Fee Feet From The Lea which approved copy of 28, HODDS, I which approved copy of	<u>State</u> East	Lease No #E7653 County De sent/ 240
Y Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Leese Name State AN Location Unit Letter J 23 Line of Section 7 Tow III. DESIGNATION OF TRANSP Name of Authorized Transporter of Ci. Texas N.M. Pipelin	Contraction Contra	Ingheod Gas Ca Foc. Nor.e, including F Vacuum Abo om The South Lin S Range OIL AND NATURAL Iorraensatis C (0095-0498) C or Dry Gas C	ormation Reef and 2310 35E GAS Address (Give ad P.O. Bo Address (Give ad 4001 Pe	о	Ind of Lease ate. Federal or Fee Feet From The Lea Lea Lea Lea Lea Lea Lea Le	<u>State</u> East	Lease No #E7653 County De sent/ 240
Y Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Lycase Name State AN Location Unit Letter J 23 Line of Section 7 Tow III. DESIGNATION OF TRANSP Name of Authorized Transporter of Ci. Texas N.M. Pipelin Name of Authorized Transporter of Cas Phillips Petroleur If well produces off or liquids,	Contraction Contra	Ingheod Gas Ca Foc. Nor.e, including F Vacuum Abo om The South Lin S Range OIL AND NATURAL Iorraensatis C (0095-0498) C or Dry Gas C	ormation Reef and 2310 35E , GAS Accreas (Give ac P.O. Bo Accreas (Give ac 4001 Pe 1s gas accuracy of	о	Ind of Lease ate, Federal or Fee Feet From The Lea which approved copy of 28, Hobbs, N which approved copy of ok, Odessa,	<u>State</u> East	Lease No #E7653 County De sent/ 240

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. D. l

(Signature)

District Operations Manager

April 12, 1985 (Tule)

(Date)

OIL CONSERVATION DIVISION 19 85 APPE BY DISTRICT I SUFERVISOR TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despend 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 allcaable 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 multip. completed wells.