

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

AS SET FORTH IN REGULATION	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

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

Form C-104
Revised 10/01/79
Format 06-01-03
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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. 116	Pool Name, including Formation Vacuum Grayburg San Andres	Kind of Lease State, Federal or Fee	State State	Lease No. B-1031
Location Unit Letter P	990	South	870	East	
Line of Section 6	Township 18S	Range 35E	Lea	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 E	Sec. 31	Twp. 17S	Rge. 35E	Is gas actually connected? Yes	When 8/1/79

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)
District 1 Supervisor
6/1/85

OIL CONSERVATION DIVISION
APPROVED _____ 6/1, 19 95
BY *James L. L.*
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 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 name, well name, or number, or transporter or other such change of data.
Separate Forms C-104 must be filed for each pool in multi-completed wells.