STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
BANTA FE			
PILE			
U.S.O.4,			
LAND OFFICE			
TRANSPORTER	DIL		
	BAB		
OPERATOR			
PROMATION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, HEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST	FUR ALLUMABLE		
AND			

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Operator			
TEXACO Producing Inc.			
P. O. Box 728, Hobbs, New Mexico 88340			
Reason(s) for filing (Check proper box)	Omer (Please explain)		
New Well Change in Transporter of:	Change of Operator from Getty to		
	TEXACO Producing Inc. 12/31/84		
X Change in Ownership Casinghead Gas C	chdenadle		
If change of ownership give name and address of previous owner			
II. DES - ETION OF WELL AND LEASE Lease hore Well No. Pool Name, Including F	ormation Aind of Lease Lease No.		
i !	Steen Federal or Fee RED		
H.D. McKinley 8 Hobbs Blin	ebry 1 22 j		
Unit Letter H 2310 Feet From The North Lin	ne and 430 Feet From The East		
Line of Section 30 Township 18S Range	38E , NMPM, Lea County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	L GAS		
Name of Authorized Transporter of Cit or Condensate	Addrass (Give address to which approved copy of this form is to be sent)		
Shell Pipeline Corp. Name of Authorized Transporter of Castrighedd Gas Corp. or Dry Gas	P.O. Box 1910, Midland, TX 79702		
	Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Co.	4001 Penbrook, Odessa, TX 79762		
If well produces oil or liquide, Qive location of tanks. Unit Sec. Twp. Rec. 130 188 38E	NO		
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	OIL CONSERVATION DIVISION		
11	APPROVED 6/1 19 85		
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	AFFROVED		
my knowledge and belief.	BY LIMING		
	TITLE DISTRICT I SUFERVISOR		
w.B. hh			
W.D. hm	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen		
(Signature)	well, this form must be accompanied by a tabulation of the deviati		
District Operations Manager	tests taken on the well in accordance with RULE 111.		
April 5, 1985 (τω)	All sections of this form must be filled out completely for alle able on new and recompleted wells.		
(Date)	Fill out only Sections 1, II, III, and VI for changes of owns 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.		