BNERGY AND MINERALS DEPARTME	• •		ERVATIO)N	Form C-104 Revised 10-0 Format 05-0 Page 1	
	P. 0. 80X 2088 SANTA FE, NEW MEXICO 87501					· • • • •	
A. B. B. A. B.							
LAND OFFICE							
TRANSPORTER OIL				· · · · - ·			
OPERATOR		REQUEST FOR ALLOWABLE					
PROBATION OFFICE							
		ALAHON IU	TRANSPORT	IL AND NATU	RAL GAS		
Operater							
Texaco Producing Inc.		•					
Address	· ·		·				
P.O. Box 728, Hobbs,	New Mexico	88240					
Rooson(s) for filing (Check proper bo	£)			Other (Please	esplain)		
New Well	Change (a Transporter el	l:			_	
Recompletion	ou		Dry Ges	Dry Gen Change of Operator		from Texaco Inc. to	
Change in Ownership					Texaco Producing Inc. Effective of /01/		
	C••	Inghead Ges	Condensati	Техасо	Producing Inc.	Effecti	ve ₀₁ /01/8
f change of ownership give name ad address of previous owner I. DESCRIPTION OF WELL AN Losse Name	AD LEASE		Condensate	Texaco	Kind of Leese	Effecti	Ve 01 /01/87
I. DESCRIPTION OF WELL AN	AD LEASE	Pool Name, In					
nd eddress of previous owner <u> I. DESCRIPTION OF WELL AN</u> Lesse Name	VD LEASE Well No. 7	Pool Name, In Vacuum G	cluding Formation	Andres	Kind of Loose	State	Lecse No.
I. DESCRIPTION OF WELL AN Lesse Name West Vacuum Unit Location 90 Unit Lottor C ; 980	ID LEASE Well No. 7 10 Peer Fr	Pool Name, in Vacuum G	cluding Formation rayburg San	Andres	Kind of Leose Sidle, Federal or Fee Foot From TheV	State	Lecse No.
I. DESCRIPTION OF WELL AN Lesse Name West Vacuum Unit Location 90 Unit Letter C : 980 Line of Sociton 33 To IL. DESIGNATION OF TRANS Name of Authorized Transporter of Of Injection	VD LEASE Well No. 7 10 Peet Fr pomship 1 SPORTER OF	Pool Name, In Vacuum G m The North 75 R OIL AND N/	clading Formation arayburg San <u>ange 34E</u> ATURAL GAS Atdree	Andres 2310 , NutPha o (Give address)	Kind of Leose Sidle, Federal or Fee Foot From TheV	State Test	County County
I. DESCRIPTION OF WELL AN Locate Name West Vacuum Unit Location 90 Unit Lotter	VD LEASE Well No. 7 10 2- Feet Fro ownship 1 3PORTER OF 1 or C 10 or C 10 or C	Pool Name, in Vacuum G The North 7S R OIL AND N/ Condensate	ATURAL GAS Addree	Andres 2310 , NutPhi a (Give address i a (Give address i actuelly connector	Kind of Looso State, Foderal or Foo Foot From TheV V V V & Uhen V Morn V	State Test	County County

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.

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Signature, District Administrative Supervisor (Tule) February 09, 1987 (Dase)

	UIL CONSERVATION DIVISION	
APPROVED	<u></u>	
BY	Fail & Cantos	_
TITLE	Geologist	

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

If this is a request for allowable for a newly drilled or despenwell, this form must be accompanied by a tabulation of the deviatic 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 multipl completed wells.



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