STATE OF NEW MEXICO				•					
ENLAGY AND MINERALS DEPARTM	IENT						Form C-104		
							Revised 10.01	.76	
							Format 06 01	83	
							Page 1		
P. O. BOX 2088									
SANTA FE, NEW MEXICO 87501									
LAND OFFICE									
TAANTPORTER DIL	· · · · · · · · · · · · · · · · · · ·								
REQUEST FOR ALLOWABLE									
AND									
PROMATION OFFICE	AUTHO	RIZATION TO	TRANSP	ORT OIL	AND NATU	RAL GAS			
Ι.									
Operator			# 1			•			
TEXACO PRODUCING INC.									
Address								· ·	
P. O. Box 728, Hobbs	, New Mexi	co 88240							
Resson(s) for filing (Check proper					Other (Please	explain)			
<u> </u>		in Transporter of			-	of Operator from	TEXACO	INC. TO	
New Well		-		_	-	PRODUCING INC.			
Recompletion		l	니니 아	Gas	ILARCO I	PRODUCING INC.		0/1/05.	
X Change in Ownership	c•	singhead Gas	Co	ndensale					
If change of ownership give nam and address of previous owner	······						<u> </u>		
IL DESCRIPTION OF WELL	Well N	o. Pool Name, Inc	cluding Fo	rmation		Kind of Lease		Lease tio.	
Lease Name	13	-	1			State, Federal or Fee	2+	-	
West Lovington Unit		Lovingtor	<u>San I</u>	Andres	West		slate	<u>B-4286</u>	
Location Unit Letter <u>F</u> ;;	<u>1980 </u>	From The		and	980	Feel From The No	orth		
Line of Section 4	Township 1	.7–S n	ange	36-E	, NMPM	, Lea		County	
III. DESIGNATION OF TRA	NSPORTER O	FOIL AND NA	TURAL	GAS					
Name of Authorized Transporter of	011 [X] •	Condensate		Address	(Give address)	to which approved copy of	this form is t	o be sentj	
Texas New Mexico Pip		${}$	-0003						
				Address	Give address	B. Hobbs, N.M. 8 to which approved copy of	10240	o be senti	
Name of Authorized Transporter of			- LJ						
Phillips Petroleum Co.					4001 Penbrook, Odessa, TX 79762				
		ec. Twp.	Rge.		tually connect	•			
If well produces oil or liquide,	I 5	5 17-S	36-E	Yes		ı Unknown			

11

If this production is commingled with that from any other lease or pool, give commingling order numbers

NOTT: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

give location of tanks.

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.

WD

(Signature)

District Operations Manager

6/1/85

(Date)

(Tille)

OIL CONSERVATION DIVISION 6/1 85 APPD BY DISTRICT 1 SUFERVISOR TITLE

This form is to be filed in compliance with NULE 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 AULE 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 owner, well name or number, or transporter, or other such change of condition.

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