STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	£ 1+ L 0		
D-STRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	DAB		
OPERATOR			
PROMITTION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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

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

REQUEST FOR ALLOWABLE

DPERITOR		AND						
PROMATION OFFICE	AUTHORIZA	TION TO TRANS	SPORT OIL	AND NATU	RAL GAS			
ſ.								
Operator								
TEXACO Producing Inc								
Address	<u></u>							
P. O. Box 728, Hobbs,	. New Mexico 8	8240						
				101				
Reason(s) for filing (Check proper &			Other (Picase explain) Change of Operator from Getty to					
New Well	Change in Tro	Change in Transporter of:			1			
Recompletion	U 0:1	<u></u> :	Dry Gos TEXACO Producing Inc. 12/31/84			/04		
X Change in Ownership	Casinghe	ad Gas 🔲 (Condensale					
				. L				
If change of ownership give name	t							
and address of previous owner								
II. DESCRIPTION OF WELL A	ND LEASE					Lease Nc.		
Lease Name	Well No. Poo	l Name, Including			Kind of Lease	B1565		
State BA	5	Vacuum G	lorieta		State, Federal or FeeState	DI303		
Location								
	60	North		560	West			
Unit Letter::	Feet From TI	h• L	ine and		feet from the			
36	. 17S		34E		Lea	County		
Line of Section	Township	Range		, имри				
Texas New Mexico Pipe Name of Authorized Transporter of Phillips Petroleum Co If well produces oil or Haulds, give location of tanks. If this production is commingled	Unit Sec. C 36	Twp. Rgs.	Address 4001 Is gas a Yes	(Give address Penbrook ctually connect	10/11/63	s to be sent)		
NOTE: Complete Parts IV an	nd V on reverse side	if necessary.						
			11 11	חוו ח	ONSERVATION DIVISION			
VI. CERTIFICATE OF COMPL	JANCE		11	<u> </u>		. 05		
I hereby certify that the rules and regu	dations of the Oil Conse	vation Division have	APPR	00 ED	0 2 6/1	85		
been complied with and that the inform	nation given is true and co	emplete to the best o	of	17	1 14			
my knowledge and belief.	nacion given is was an a		BY_	Line	12/1/2000			
,				DISTRE	T I SUPERVISOR			
			TITL	E DISTRI	C: 1 JOSER FIJOR			
w. B. 6								
$\omega D \omega$					be filed in compliance with Rt			
			- 16	this is a req	uest for allowable for a newly di t be accompanied by a tabulatio	illed or deepend		
•	ignature)		Well.	inis iorm mus taken on the	well in accordance with RULE	111.		
District Operations Manager					this form must be filled out con			
	(Title)		able o	n new and re	completed wells.	• • • • • • • • • • • • • • • • • • • •		
April 11, 1985			=	ill out only	Sections 1. H. III. and VI for c	hanges of owne		
	(Date)		well n	ame or numbe	r, or transporter, or other such ch.	inge of condition		
,			41					