STATE OF NEW MEXICO					Form C-104 Revised 10-01- Format 06-01-5	7 6 3
	OUL CONSE	ERVATION	DIVISIO	N	Page 1	
SANTA PE		O. BOX 2088				
FILE		NEW MEXIC	0 87501		•	
U.S.G.A.	SANTAFE					
LAND OFFICE	• .					
TAANSPORTER OIL	REQUE	ST FOR ALLOWA	BLE			
PROBATION OFFICE	AUTHORIZATION TO	AND TRANSPORT OIL	AND NATUR	AL GAS		
· · · · · · · · · · · · · · · · · · ·				······································		
Operator			•			
TEXACO Producing Inc.						
P. O. Box 728, Hobbs, Ne	w Mexico 88240					
			Other (Please	explain)		
				c American fr	om Cetty t	0
Reason(s) for filing (Check proper box)	Change in Temperatur of		Change 🤆	of Operator fr	On Occept	
Reason(s) for filing (Check proper box)	Change in Transporter of:		Change C TEXACO F	producing Inc.	12/31/8	4
		Dry Gas	Change C TEXACO P	producing Inc.	12/31/8	4
New Well Recompletion X Change in Ownership			Change C TEXACO F	Producing Inc.	12/31/8	4
New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner	Oil Casinghead Gas	Dry Gas Condensate	Change C TEXACO F	Producing Inc.	12/31/8	4
New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner	Oil Casinghead Gas LEASE Well No. Pool Name, Inc	Dry Gas Condensate	Change C TEXACO F	Kind of Lease	12/31/8	4
New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND	Oil Casinghead Gas	Dry Gas Condensate	Change C TEXACO F	Producing Inc.	12/31/8	4
New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Leose Name	Oil Casinghead Gas LEASE Well No. Pool Name, Inc	Dry Gas Condensate	Change C TEXACO F 2285	Kind of Lease	12/31/8	4 L No. B1334
New Well Recomplation Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Lease Name Skelly P State Location Unit Letter 22	Casinghead Gas LEASE Well No. Pool Name, Inc. 3 Vacuum G Feet From The North	Dry Gas Condensate	TEXACO F	Kind of Lease State, Federal of Fee Feet From The	12/31/8	4
New Well Recompletion Y Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Lecose Name Skelly P State Location Unit Letter C Line of Section 33 Town	Casinghead Gas LEASE Well No. Pool Name, Inc. 3 Vacuum G Feet From The North hip 17S R	Dry Gas Condensate	техасо р 2285 , ммрм	Kind of Lease Store, Federal or Fee Feet From The ,Lea	12/31/8 State West	4 Lease No. B1334 County
New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Lecas Name Skelly P State Location Unit Letter Line of Section II. DESIGNATION OF TRANSPO	Casinghead Gas LEASE Well No. Pool Name, Inc 3 Vacuum GFeet From TheNortL hip 17S R ORTER OF OIL AND N/	Dry Gas Condensate Condensate Cluding Formation lorieta h Line and ange 35E ATURAL GAS	TEXACO F 2285 , NMPM (Give address	Kind of Lease State, Federal or Fee Feet From The Lea	12/31/8 State West	4 Lease No. B1334 County
New Well Recompletion Change in Ownership Change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AND Lease Name Skelly P State Location Unit Letter	Casinghead Gas LEASE Well No. Pool Name, Inc 3 Vacuum GFeet From TheNortL hip 17S R ORTER OF OIL AND N/	Dry Gas Condensate Condensate	TEXACO F 2285 , NMPM (Give address	Kind of Lease State, Federal of Fee Feet From The Lea	12/31/8 <u>State</u> <u>West</u> <u>y of this form is t</u> N M 88240	4 Lease No. B1334 County
New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND Lease Name Skelly P State Location Unit Letter C ; 779 Line of Section II. DESIGNATION OF TRANSPO Name of Authorized Transporter of Cill Texas New Mexico Pipelin	Casinghead Gas LEASE Well No. Pool Nome, Inc. 3 Vacuum G. Ship 17S Ri ORTER OF OIL AND NA Cor Condensate Die Co. (0055-0617)	Dry Gas Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate Condensate	TEXACO F 2285 , NMPM (Give address P.O. BOX (Give address	Kind of Lease State, Federal or Fee Feet From The Lea to which approved cop 2528, Hobbs, to which approved cop	12/31/8 State West N.M.88240 y of this form is t	4 Lease No. B1334 County o be sent/
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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.

WD

(Signature)

District Operations Manager April 3, 1985

(Date)

OIL CONSERVATION DIVISION 6/1 , 19 85 APPRC ~ BY DISTRICT I SUFERVISOR TITLE

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

If this is a request for allowable for a newly drilled or deepence 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 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.

RECEIVED 34 1 MAY 81 1985 O.C.D. HOBBS