| STATE OF NEW MEXICO  |                            |   | · .                              |  |                        |                              |                |  |
|--|----------------------------|---|----------------------------------|--|------------------------|------------------------------|----------------|--|
| ENERGY MO MINERALS DEPARTMENT  | •                          |   |                                  |  |                        | Form C-104<br>Revised 10-01- | 78             |  |
|  |                            |   |                                  |  |                        |                              | u<br>u         |  |
| ULL CONSERVATION DIVISION  |                            |   |                                  |  |                        |                              |                |  |
| P. O. BOX 2088<br>U.S.O.S. SANTA FE, NEW MEXICO 87501  |                            |   |                                  |  |                        |                              |                |  |
| U.S.O.B.   | SANTA F                    | E, NEW A  | MEXIC                            | 0 87501  |                        | •                            |                |  |
| LAND OFFICE  | • .                        |   |                                  |  |                        |                              |                |  |
| TRANSPORTER DIL  | DEDI                       | JEST FOR A  |                                  |  |                        |                              |                |  |
| OPERATOR   | REWL                       | AND   |                                  |  |                        |                              |                |  |
| PROMATION OFFICE   | AUTHORIZATION TO           |   |                                  | AND NATUR  | RAL GAS                |                              |                |  |
| <b>T</b>   | RUTHORIZATION TO           |   |                                  |  |                        |                              |                |  |
| Operator   |                            |   |                                  |  |                        |                              |                |  |
| TEXACO Producing Inc.  |                            |   |                                  |  |                        |                              |                |  |
| Address  |                            |   |                                  |  |                        |                              |                |  |
| P. O. Box 728, Hobbs, N  | ew Mexico 88240            |   |                                  |  |                        |                              |                |  |
| Reason(s) for filing (Check proper box)  |                            |   | 1                                | Other (Please  |                        |                              |                |  |
| New Well Change in Transporter of:   |                            |   | Change of Operator from Getty to |  |                        |                              |                |  |
| Recompletion   | npletion Oil 1             |   | y Con TEXACO Producing Inc. 12   |  |                        | 12/31/8                      | 4              |  |
| Y Change in Ownership  | Casinghead Gas             | Conde   | ensate                           |  |                        |                              |                |  |
| If change of ownership give name<br>and address of previous owner  |                            |   |                                  |  |                        |                              |                |  |
| II. DESCRIPTION OF WELL AND  | ) LEASE                    | - cluding Form  |                                  |  | Kind of Lease          |                              | Lease No.      |  |
| Leose Nome<br>State BA   |                            | Well No. Pool Nome, Including Format<br>8 Vacuum Wolfcamp |                                  |  | State, Federal or Fee  | State                        | B1565          |  |
| Location<br>B 766<br>Unit Letter   | Nort                       | hLin• a   | 20                               | 086  | _ Feet From The        | ast                          |                |  |
| Line of Section 36 Town  | nahip 17S r                | Range   | 34E                              | , NMPM,  | Lea                    |                              | County         |  |
| III. DESIGNATION OF TRANSPO  | ORTER OF OIL AND N         |   | AS                               |  | a which approved come  | of this form is to           | be senij       |  |
| Name of Authorized Transporter of CII  |                            |   |                                  | Andress (Give address to which approved copy of this form is to be sent)   |                        |                              |                |  |
| <u> Texas- NM Pipeline Co. ((</u>  | )095-0725)                 |   | <u> </u>                         | <u>ox 2528.</u>  | HODDS . N.M. 8         | 8240<br>of this form is 10   | be senti       |  |
| None of Authorized Transporter of Cash   | nghead Gas 🙀 or Dry Ga     |   |                                  |  |                        |                              |                |  |
| Phillips Petroleum Compar  | <u></u>                    |   |                                  |  | Ocessa, Texas          | _79762                       |                |  |
| If well produces cil or liquids,   | Unit Sec. Twp.<br>C 36 175 | 890. II<br>34E  | Yes                              | ally connecte  | i when                 | Unknown                      |                |  |
| give location of tanks.  |                            | 1 3411  | 105                              |  |                        |                              | 1 4 7          |  |
| If this production is commingled with  | that from any other lease  | e or pool, giv  | ve commi                         | ingling order  | number:                | PC-                          | -147           |  |
| NOTE: Complete Parts IV and V  |                            |   |                                  |  |                        |                              |                |  |
| VI. CERTIFICATE OF COMPLIANCE  |                            |   |                                  | OIL CONSERVATION DIVISION  |                        |                              |                |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have<br>been complied with and that the information given is true and complete to the best of<br>the best of  |                            |   | BY                               |  |                        |                              |                |  |
| my knowledge and belief.   |                            |   | TITLE                            | DISTRK   | T I SUFERVISOR         |                              |                |  |
| w. b. hh   |                            |   |                                  | This form is to be filed in compliance with RULE 1104.   |                        |                              |                |  |
| (Since the second secon |                            |   |                                  | If this is a request for allowable for a newly drilled or deepence<br>well, this form must be accompanied by a tabulation of the deviation |                        |                              |                |  |
|  |                            |   |                                  | tests taken on the well in accordance with RULE 111.   |                        |                              |                |  |
| <u>District Operations Man</u>   | lager                      |   |                                  | <b>-</b>   | this form must be fill | ed out complet               | aly for allow- |  |

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.

(Date)

(Tule)

April 11, 1985

