

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
TEXACO Producing Inc.
Address
P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Gaslinehead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
Change of Operator from Getty to TEXACO Producing Inc. 12/31/84

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State BA</u>	Well No. <u>9</u>	Pool Name, including Formation <u>Vacuum Glorieta</u>	Kind of Lease State, Federal or Fee	State <u>Lea</u>	Lease No. <u>B1565</u>
Location Unit Letter <u>B</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line of Section <u>36</u> Township <u>17S</u> Range <u>34E</u> , NMPM, County _____					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas- NM Pipeline Co. (0095-0725)</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2528, Hobbs, N.M. 88240</u>	
Name of Authorized Transporter of Gaslinehead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79762</u>	
If well produces oil or liquids, give location of tanks. Unit <u>C</u> Sec. <u>36</u> Twp. <u>17S</u> Rge. <u>34E</u>	Is gas actually connected? <u>Yes</u>	When <u>1/24/65</u>

If this production is commingled with that from any other lease or pool, give commingling order number: PC-147

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

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.

W. B. Loh

(Signature)

District Operations Manager

(Title)

April 11, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 19 85

BY [Signature]
TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 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 RULE 111.

All sections of this form must be filled out completely for allowables 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 multiple completed wells.

RECEIVED

MAY 31 1985

C.C.D.
HOBBS OFFICE