STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

(Deie)

DISTRIBUTION				
SANTA FE				
FILE		1		
U.B.G.A.				
LAND OFFICE				
TRANSPORTER	014			
	GAS	1		
OPERATOR		j j		
PROBATION OFF				

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 multiple

REQUEST FOR ALLOWABLE AND

AUTHO	ORIZATION TO TRANS	PORT OIL	AND NATUR	RAL GAS			
I.							
Operator							
Texaco Producing Inc.							
Address							
P. O. Box 728, Hobbs, NM 88240							
Reason(s) for filing (Check proper box)	eson(s) for filing (Check proper box)			Other (Please explain)			
	in Transporter of:	-					
Recompletion		Gas Transporter Name Change					
	ssinghead Gas	ondensate					
Change in Other							
If change of ownership give name			•	-			
and address of previous owner							
II. DESCRIPTION OF WELL AND LEASE	lo. Pool Name, including			Kind of Lease	Legse No.		
Lease Name					_		
State V2	Lovington Pac	<u>ldock</u>		State, Federal or Fee State	<u> A1118</u>		
Location							
Unit Letter C . 660 Feet I	From The North L	ine and	980	Feet From TheWest			
Unit Latter		· · · · ·					
Line of Section 5 Township 17	S Range	37E	, ммрм	. Lea	County		
<u> </u>				- -			
III. DESIGNATION OF TRANSPORTER O	F OIL AND NATURA	AL GAS					
None of Authorized Transporter of Cit AX or	Concensate	Address (Give aadress	to which approved copy of this form t	s to be sent)		
P 0 BOY 2528 Hobbs, NM 88240							
Texas NM Pipeline Co. (0095-02) Name of Authorized Transporter of Casingness Gas	Of Dry Gasi	Address (Give address	to which approved copy of this form i	s to be sent/		
t .							
None	Sec. Twp. Rge.	lls gas gat	uaily connect	ed? When			
If well produces oil or liquids,							
give location of tanks.	5 17 37	Yes		10/01/71			
If this production is commingled with that from	any other lesse or pool	l, give comm	ungling orde	r number:			
NOTE: Complete Parts IV and V on revers	e side if necessary.						
OIL CONSERVATION DIVISION				•			
VI. CERTIFICATE OF COMPLIANCE		- 11		HIN 1 1 100C			
I hereby certify that the rules and regulations of the Oi	l Conservation Division have	APPRO	OVED	JUN 1 1980	_, 19		
been complied with and that the information given is the	e and complete to the best o	∉ ∭					
my knowledge and bener.		BY CRIGINAL SIGNED BY JEEF THAT					
				DISTRICT I SUPERVISOR			
		TITLE	•		-		
1-10.		This form is to be filed in compliance with RULE 1104.					
171/ Moummo		If this is a request for allowable for a newly drilled or deepense					
(Signature)		well, th	his form mus	t be accompanied by a tabulation	of the deviation		
District Administrative Super	visor	tests taken on the wail in accordance with RULE 111. All sections of this form must be filled out completely for allow-					
(Title)	<u></u>			this form must be filled out com completed wells.	presert for effer-		
• • •		11		Sections I. U. III, and VI for cl	hanges of owner		
05/21/86			we or unmpe	r, or transporter, or other such cha	inge of conditions		

completed walls.