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TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2083
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 12-01-78
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
Change of Operator from TEXACO INC. TO TEXACO PRODUCING INC. effective 6/1/85.
If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE
Lease Name: **Central Vacuum Unit** Well No.: **19** Pool Name, including Formation: **Vacuum Grayburg San Andres** Kind of Lease: **State, Federal or Fee State** Lease No.: **B-2245**
Location
Unit Letter: **K** : **1750** Feet From The **West** Line and **1650** Feet From The **South**
Line of Section: **30** Township: **17S** Range: **35E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Mobil Pipe Line Company
Texas N.M. Pipe Line Co. (0095-0799)
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 900, Dallas, TX 75221
P.O. Box 2528, Hobbs, N.M. 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum Co.
TEXACO Inc.
Address (Give address to which approved copy of this form is to be sent)
4001 Penbrook, Odessa, TX 79762
P.O. Box 728, Hobbs, N.M. 88240
If well produces oil or liquids, give location of tanks. Unit: **E** Sec.: **31** Twp.: **17S** Rge.: **35E** Is gas actually connected? **Yes** when **8/1/79**

If this production is commingled with that from any other lease or pool, give commingling order number: _____
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)
Planning Operations Manager
(Title)
6/1/85
(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 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 multi-completed wells.

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