## STATE OF NEW MEXICO ENERGY AND MINERALG DEPARTMENT

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14-14 / E		
71L#		1
U.B. GUB.		
LAND CFFICE		
TRANSPORTER	31L	
	GAS	
OPERATOR I		
PROMATION OFFICE		

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Physied 10:01:13 Format 66-01-32 Page 1

REQUEST FOR ALLOWABLE

OPERATOR	AND	
AUTHORIZATION TO TRAF	NSPORT GIL AND NATURAL GAS	
1. Operator		
TEXTO PRODUCING INC.		
P. O. Box 728, Hobbs, New Mexico 88240	Other (Please expiain)	
Reason(s) for filing (Check proper sox)  Change in Transporter of:	Change of Operator from TEXACO INC. TO	
Recompletion Oil	Dry Gas TEXACO PRODUCING INC. effective 6/1/85.	
Change in Ownership Casinghead Gas	Condensate	
If change of ownership give name and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE		
Weil No.   Pool Name, Including	urg San Andres  Kind of Legge  Kind of Legge  State  B-155	
Location E 2630 North Unit Letter Feet From The	1310 West	
Line of Section 36 Township 175 Range	. 34E , NMPM, Lea County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR    Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)    Address (Give address to which approved copy of this form is to be sent)	
If this production is commingled with that from any other lease or po-	ol, give commingling order number:	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE  Thereby certify that the rules and regulations of the Oil Conservation Division has	OIL CONSERVATION DIVISION  APPROVED 6/1 19 85	
been complied with and that the information given is true and complete to the best my knowledge and belief.	BY DISTRICT 1 SUFERVISO2	
W. D. Let	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despends well, this form must be accompanied by a tabulation of the deviat.	
To the tollower tions Manager	tests taken on the well in accordance with AULE 111.  All sections of this form must be filled out completely for allow-	
(Tale)	sble on new and recompleted wells.	
(Site)	Fill out only Sections I, M. III, and VI for changes of paners well name or number, or transporter or picer adon change of condition.  Separate Forms C-164 must be filed for each pool in multiple completed wells.	