

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
FILE	
U.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 06-01-83
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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)		Other (Please explain)
☐ New Well	Change in Transporter of:	Change of Operator from TEXACO INC. TO TEXACO PRODUCING INC. effective 6/1/85.
☐ Recompletion	☐ Oil	
☒ Change in Ownership	☐ Casinghead Gas	
	☐ Dry Gas	
		☐ Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Central Vacuum Unit	30	Vacuum Grayburg San Andres	State, Federal or Fee State	B-2245
Location				
Unit Letter		Feet From The	Line and	Feet From The
K	1360	South	2560	West
Line of Section	Township	Range	County	
30	17S	35E	NMPM, Lea	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Injection	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when

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)

District Operations Manager

(Title)

6/1/85

(Date)

OIL CONSERVATION DIVISION

APPROVED *James L. Loh* JUL 18 1985

BY *James L. Loh*
TITLE DISTRICT 1 SUPERVISOR

This form is to be filled 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 allow-
able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for change 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.