## STATE OF NEW MEXICO ENERGY MID MINERALS DEPARTMENT

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941RHUT104					
SANTA PE					
FILE					
V.3.4.4.					
LAND OFFICE					
TRAMSPORTER	011				
	848				
OPERATOR					
PROBATION OFFICE					

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

Ferm C-104 Revised 10-01-78 Formet 06-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
Operator								<del></del>	<del></del>
Texaco Producing Inc.		·			,				
Address Pers 729 Hobbes Nov.	Movio	88240							
P.O. Box 728, Hobbs, New Reason(s) for filing (Check proper box)	PEXICO	00240			Other (Please	esplain)			
New Well	Change in Transporter of:				Change of Operator from Texaco Inc. to				
Recogniction	OU Dry Ges			r Ges	Change of	of Operat	or iro	m lexaco	Inc. to
Change in Ownership	Ceelo	ghead Gas	□ ~	ndensate	Texaco	Stodneruk	j inc.	Effectiv	ve 01/01/8
	<del></del>		<del></del>						
f change of ownership give name and address of previous owner					<u> </u>				
•									
I. DESCRIPTION OF WELL AND L	EASE No. 1	Pool Name, In	cludes Se	v=21100	<del></del>	Kind of Leas			Legge No.
Louis Name	54				Andrea	Siete, Federe		State	B-871
West Vacuum Unit	1 24.1	Vacuum G	raybur	g San	Alutes			State	J <u></u>
Location * 212	Δ.	Sc	math.		810	<b>3</b>	_ W	est	
Unit Letter L : : 213	U Feet From	The SC	Julii Lin	• end	0.10	_ Feet From	The	<u> </u>	
Line of Section 33 Townsh	սթ 17։	S .	lange	34E	NMPM	Lea	L		County
Line of Section 33 Townsh	<u> </u>	<u> </u>					<del></del>		
III. DESIGNATION OF TRANSPOR	TER OF C	DIL AND N	ATURAL	. GAS					
Name of Authorized Transporter of OII	or Co	endensate 🔲		Address	(Give address t	which appro	ued copy o	of this form is t	to be sent)
Texas New Mexico Pipe Lin		ny		P.O.	Box 2528	Hobbs.	New Me	xico 882	40
Hame of Authorized Transporter of Casing	head Gas 🔨	or Dry Go	- 0	1	(Give address t				io be sentj
Phillips 66 Natural Gas C	omapny				Penbrook,			79762	
If well produces oil or liquids,	nii Sec.	•	Rge.	is das a	ctually connects	•47 <sub> </sub> ₩1	Men.	\ /OF /O1	
give location of tanks.	D 3	<u>185</u>	: 34E	<u> </u>	Yes	<u>_</u>	<u>U2</u>	2/25/81	
If this preduction is commingled with t	hat from an	y other lease	e or pool,	give com	mingling order	number:			
NOTE: Complete Parts IV and V o									
NOTE: Complete 1 alis IV and V o			J.	11					
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				OIL C	ONSERVA		_		
			APPROVED APR 24 1987					. 19	
			1					,	
my knowledge and belief.		-		BY_	///	Tell :	31	ann	
				1	Gen	logist	•		
110				TITL		•			
111/60					his form is to				
Signature Signature	ming	<u> </u>			this form mus	t be secomp	enied by	e tabulation	led or deepen of the deviati
District Adm		tive Supe	ervisor	tooto	taken on the	mell is seed	ordance w	IIB RULE 11	11.
(Tule)				ii a	il sections of	this form m	ust be fill	led out compl	letely for allo
February 09, 1987				d VI for the	inges of own:				
(Date)	<del></del>			wells	ame or numbe	r, er transpo	rter, or eth	et ancy chau	igo of condition
						• C-104 m	nt be file	d for each 1	pool in multip
				in come!	sted wells.				

NPR 22 1987