

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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
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
☐ Castinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
Change of Operator from Getty to
TEXACO Producing Inc. 12/31/84

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Eumont Unit	Well No. 23	Pool Name, including Formation Eumont Yates 7-Riv. Queen	Kind of Lease State, Federal or Fee	Lease No. FEE
Location Unit Letter <u>L</u> ; <u>1982</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>3</u> Township <u>19S</u> Range <u>37E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co. (0055-1951) Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240 P.O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Castinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit <u>M</u> Sec. <u>3</u> Twp. <u>19S</u> Rng. <u>37E</u> Is gas actually connected? <u>Yes</u> 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)

April 4, 1985

(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 allow-
able 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 multiple
completed wells.