STATE OF NEW MEXICO (NEEDY 440 MINERALS DEFARTMENT)

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OIL CONSERVATION DIVISION PO BOX 2088 SANTA FE, NEW MEXICO 87501

Form Dirick

Revised 10-01-18

Format 05-01-83

Page 1

RECUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

THE STATE OF THE S	AUTHOR	RIZATION TO TR	ATION TO TRANSPORT OIL AND NATURAL GAS				
C;*(0)0'							
Texaco Producing Inc.							
Assiess							
PO Box 728, Hobbs, New Me	exico 88	240					
Recson(s) for triing (Check proper box)				Conn. : Elan			
New Well	Change in Transporter of:						
Peccing.etjon	E CII		= _ Dry Gas				
Charle in Chiramatap	∑ c₃.	ingrees Oss	≡ Connense •	i			
Tahange of Chierosolo give name nd address of previous chier							
L DISCRIPTION OF WELL AND			~				,
East Eumont Unit	1	Foot here, inclus.			Kind of Lease		Lease No.
Location	38	Eumont Yates	7-River	s Queen	State, Federal or Fee	State	B-2330
3.5	_	om The North	Line and	660	Feet From The	West	
Line of Section 15 Towns	hip I	9S Range	37E	, NMP	M. Lea		County
Texas New Mexico Pipeline Name of Authorized Transporter of Casino None	Co (005	55-1951) 2	PO Bo	PO Box 2528, Hobbs, New Mexico 88240 Address (Give address to which approved copy of this form is to be sent)			
if well produces oil or liquids, live location of tanks.	nii Sec M 3	195 37	1	ctually connec	cted? When		
this production is commingled with	hat from an						
•			ooi, give com	mingling ord	er number:	······································	
OTE: Complete Parts IV and V	n reverse s	ide if necessary,	*				
I. CERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of the Oil Conservation Division have ten complied with and that the information given is true and complete to the best of			ave APPR	OIL CONSERVATION DIVISION APPROVED SEP 22 1938			
y knowledge and belief.		nd complete to the bes	· / BY	DISTRICT I SUPERVISOR			
	$\overline{}$		TITLE	£			
On Hear			T	his form is t	o be filed in compliance	with BULE	1104.
(Signaluri lobbs Area Superintendent	/	397-3571	— 1f	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 AULE 111.			
(Tilla) 1-9-88			able o	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
(Daie)			Marra Di	Fill out only Sections I. II. III, and VI for changes of conner, well name or number, or transporter, or other such change of condition.			
		-	comple	parate Form ted wells.	s C-104 must be filed	for each poo	ol in multiply