STATE OF NEW MEYICO NERGY AVOINT NERALS CEFARTIVENT

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OIL CONSERVATION DIVISION P O. BOX 2088 SANTA FE, NEW MEXICO 37501

Form CHO4 Revised 10-01-78 Format 05-01-83 Page 1

RECUEST FOR ALLOWARIE

CPERATOR	RECOEST FOR ALLOWABLE						
PACEATION OFFICE	AUTHORIZ	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
C7,*(0\0!							
Texaco Producing Inc.							
Adares							
PO Box 728, Hobbs, New :	Mexico 882	1 0					
Preson(s) for filing (Check proper sox)			Oiner (Pleas	se exciding			
New Well		Transporter of:		,			
Personation	⊞ to.:		Pr Cm				
Change in Owner and	X :		umden∍a e		•		
change of ownership give name nd address of previous owner							
L DESCRIPTION OF WELL AND	D LEASE				,		
Lecse Nome	heli No. j F	po. Name, including f		Kind of Lease	Lecse No.		
East Eumont Unit	47 E	Eumont Yates 7	-Rivers Queen	State. Federal or Fee State	E5889-1		
Location Unit Letter P : 660	Eest From	The East Lie	ne and660	Feet From TheSouth			
Line of Section 16 Tow	mahip 19	Range	37 , NMP	м. Lea	County		
II. DESIGNATION OF TRANSP		IL AND NATURA		to which approved copy of this form i	s to be senti		
Texas New Mexico Pipelin							
Name of Authorized Transporter of Cos None	inghead Gas KX	or Dry Gos		to which approved copy of this form i			
If well produces oil or liquids, give location of tanks.	Unii Sec.	Twp. Rge.	ls que actually connec	ted? When			
this production is commingled wit IOTE: Complete Parts IV and V			give commingling order	er number:			
			1				
1. CERTIFICATE OF COMPLIAN	NCE		OIL (CONSERVATION DIVISION			
hereby certify that the rules and regulation ten complied with and that the information	ons of the Oil Con	servation Division have	APPROVED	SEP 2 2 1988	. , 19		
y knowledge and belief.			**	RIGINAL SIGNED BY JERRY SEXT			
		•		DISTRICT I SUPERVISOR	ION		
•			TITLE	DISTRICT I SUPERVISUR			
la Hear			This form is t	o be filed in compliance with AU	LE 1104.		
(Signalway) Hobbs Area Superintendent 397-3571			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.				
9-9-88	1)		All sections of this form must be filled out completely for allow able on new and recompleted wells.				
(Date)			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 Form completed wells.	s C-104 must be filed for each	pool in multiply		