

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                        |     |
|------------------------|-----|
| NO. OF COPIES RECEIVED |     |
| DISTRIBUTION           |     |
| SANTA FE               |     |
| FILE                   |     |
| U.S.O.A.               |     |
| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
| OPERATOR               | GAS |
| PERMITS OFFICE         |     |

Operator  
Texaco Inc.

Address  
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

|                                              |                                         |                                     |                                              |
|----------------------------------------------|-----------------------------------------|-------------------------------------|----------------------------------------------|
| <input type="checkbox"/> New Well            | Change in Transporter of:               | <input type="checkbox"/> Dry Gas    | Other (Please explain)<br>Effective 12-01-86 |
| <input type="checkbox"/> Recompletion        | <input checked="" type="checkbox"/> Oil | <input type="checkbox"/> Condensate |                                              |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas |                                     |                                              |

If change of ownership give name and address of previous owner \_\_\_\_\_

1. DESCRIPTION OF WELL AND LEASE

|                              |               |                                                   |                                        |     |           |
|------------------------------|---------------|---------------------------------------------------|----------------------------------------|-----|-----------|
| Lease Name<br>C. H. Weir "A" | Well No.<br>7 | Pool Name, including Formation<br>Skaggs Drinkard | Kind of Lease<br>State, Federal or Fee | Fee | Lease No. |
|------------------------------|---------------|---------------------------------------------------|----------------------------------------|-----|-----------|

Location  
Unit Letter L ; 1985 Feet From The South Line and 660 Feet From The West  
Line of Section 12 Township 20S Range 37E , NMPM, Lea County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                                                  |                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>Texas New Mexico Pipeline Co. 0055-2313-0004 | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 2528, Hobbs, NM 88240 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br>Warren Petroleum Corp.               | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 1589, Tulsa, OK 74102 |

If well produces oil or liquids, give location of tanks.

|      |      |       |                            |              |
|------|------|-------|----------------------------|--------------|
| Unit | Sec. | Range | Is gas actually connected? | When         |
| J    | 12   | 20S   | 37E                        | Yes 09/29/61 |

If this production is commingled with that from any other lease or pool, give commingling order number PC-33

NOTE: Complete Parts IV and V on reverse side if necessary.

III. 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.

*B. D. Goldrider*  
(Signature)

for Dist. Adm. Sup.

January 27, 1987  
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 3 1987

BY Orig. Signed by Paul Kautz  
Geologist

TITLE \_\_\_\_\_

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 allowable 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 conditions.

Separate Forms C-104 must be filled for each pool in multip. completed wells.

RECEIVED  
JAN 29 1987  
OFFICE  
MOBILE OFFICE