

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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| FILE                   |     |
| U.S.G.S.               |     |
| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PRODUCTION OFFICE      |     |

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                                                                                                                            |                                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Operator<br>Texaco Inc.                                                                                                    |                                                                                                                                                                                                                                                                    |
| Address<br>P.O. Box 728, Hobbs, New Mexico 88240                                                                           |                                                                                                                                                                                                                                                                    |
| Reason(s) for filing (Check proper box)                                                                                    | Other (Please explain)                                                                                                                                                                                                                                             |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change in Transporter of:<br><input checked="" type="checkbox"/> Oil<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Condensate<br><input type="checkbox"/> Castinghead Gas<br><input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Condensate |
| Effective 12-01-86                                                                                                         |                                                                                                                                                                                                                                                                    |

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                      |               |                                                      |                                        |                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------|----------------------------------------|------------------|
| Lease Name<br>C. H. Weir "A"                                                                                                                         | Well No.<br>8 | Pool Name, including Formation<br>Weir Blinebry East | Kind of Lease<br>State, Federal or Fee | Lease No.<br>Fee |
| Location<br>Unit Letter F : 1980 Feet From The West Line and 1985 Feet From The North<br>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. 0055-2312-0006 | 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 Castinghead 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 |
| Does well produce oil or liquids?<br>Give location of tanks.                                                                                                     | Is gas actually connected?<br>Yes                                                                          |
| Unit J Sec. 12 Twp. 20S Rge. 37E                                                                                                                                 | When<br>06-02-62                                                                                           |

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.

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.

*B. D. Haldridge*  
(Signature)  
for Dist. Adm. Sup.  
(Title)  
January 27, 1987  
(Date)

OIL CONSERVATION DIVISION

APPROVED *FEES 2 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 condition.  
Separate Forms C-104 must be filed for each pool in multiphase completed wells.

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