STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

1.				
Operator				
TEXACO Producing Inc.				
Address				
P. O. Box 728, Hobbs, New Mexico 88240				
Reason(s) for filing (Check proper box)	Other (Please	explain)		t-0
	Change (of Operator fro	m Getty	2.0
	Gom TEXACO P	roducing Inc.	12/31/	84
Recompletion	lensate			
Change in Ownership Casinghead Gas Cond				
If change of ownership give name				
and address of previous owner				
T PROPERTIES OF WELL AND LEASE				Lease No.
II. DESCRIPTION OF WELL AND LEASE	mation	Kind of Lease		_
		State, Federal or Fee	State	
Location F 1980 Feet From The North Line	1980		West	
F . 1980 Feet From The NOLUL Line	and	Feet From the		
		T oo		County
Line of Section 2 Township 22S Range 3	4E , NMPh	A, IEa		
Line of Section				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS			
Name of Authorized Transporter of Oil or Condensate	Address (Give address	to which approved copy	of this form is	to be senty
Permian Corp.	Address (Give address	to which approved copy	of this form is	to be sentj
Name of Authorized Transporter of Casing aut Gos	P.O. Box 1137	, Eunice, NM 8 , Hobbs, NM 88	8231	
TEXACO Producing Inc.	P.O. Box 132(Hobbs, NM 88	<u>740 </u>	
	is gas octually connec			
If well produces oil or liquids.	17	1/20/81		

225 : 34E Yes

H.

5 If this production is commingled with that from any other lease or pool, give commingling order number:

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

VI. CERTIFICATE OF COMPLIANCE

give location of tanks.

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.

WB. hh

(Signature)	
District Operations Manager	-
(T(ile)	
April 23, 1985	
(Date)	

OIL CONSERVATION DIVISION 6/1 85 APPRO BY DISTRICT I SUFERVISOR TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owns well name or number, or transporter, or other such change of condition

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