

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRORATION OFFICE	

I. Operator
Texaco Inc.
Address
P. O. Box 728, Hobbs, NM 88240

Reason(s) for filing (Check proper box)
☐ New Well * ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate

Other (Please explain)
***Request temp. approval to commingle the Skaggs Abo with the Skaggs Drinkard, Skaggs Glorietta, Monument Tubbs and East Well Blinbry until final approval has been received.**

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name M. B. Weir "B"	Well No. 11	Pool Name, including Formation Skaggs Abo	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter N : 660 Feet From The South Line and 2079 Feet From The West Line of Section 12 Township 20S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, TX 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3000, Tulsa, OK 74102	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 12
	Twp. 20S	Rge. 37E
	Is gas actually connected? Yes	When 04/16/86

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-243**

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.

JW Browning
(Signature)
District Admin. Supervisor
(Title)
April 18, 1986
(Date)

OIL CONSERVATION DIVISION
APR 30 1986
APPROVED _____, 19____
BY **Eddie W. Seay**
TITLE **Oil & Gas Inspector**

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 multiply completed wells.

RECEIVED
JUN 29 1986
O. C. B.
Housing Office