

TO: DISTRICT SUPERVISOR
DISTRICT
SANTA FE
FILE
U.S.
LAND OFFICE
TRANSPORTER
OPERATOR
PRODUCTION OFFICE

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

Form O-104
Revised 10-01-83
Format (6-01-83)
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator TEXACO Inc.	
Address P. O. Box 728, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☒ Change in Ownership	Change of Transporter from Getty Oil Co. to TEXACO PRODUCING INC. effective 6/1/85.
Change in Transporter of: ☐ Oil ☒ Casinghead Gas ☐ Dry Gas ☐ Condensate	

change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE				
Well Name Mittie Weatherly	Well No. 1	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter F ; 1980 Feet From The North Line and 1980 Feet From The West				
Line of Section 17 Township 21S Range 37E , NMPM, Lea County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, TX 79702			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102			
Well produces oil or liquids, give location of tanks.	Unit F	Sec. 17	Twp. 21S	Rge. 37E
Is gas actually connected?	When Unknown			

this production is commingled with that from any other lease or pool, give commingling order number: **DHC R-5201**

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

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.

[Signature]
District Operations Manager
[Title]
[Date]

OIL CONSERVATION DIVISION
JUL 22 1985
APPROVED *[Signature]* 19 85
BY *[Signature]*
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 104.
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 allowables on new and recompleted wells.
Fill out only Sections I, II, III, and IV for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms O-104 must be filed for each pool in multiple completed wells.

RECEIVED

JUL 11 1985

O.C.B.
HONORARY OFFICE