## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTAINUTE					
BANTA FE					
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LAND DEFICE					
TRANSPORTER	DIL				
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OPERATOR					
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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 ALLOWASLE

OPERATOR			Ą	ND		•			
PROJECTION OFFICE	AUTHORI	ZATION TO	TRANS	PORT OF	L AND HAT	URAL GAS			
Description (Control of Control o									
TEXAGO Producing Inc.						•			
Address		· · · · · · · · · · · · · · · · · · ·							
P. O. Box 728, Hobbs, New	Mexico	88240							
Reason(s) for filing (Check proper sox)					Other (Please explain)				
New Well	Charge in Transporter of:			Change of Operator from Getty to					
Recompletion	on			TEXACO Producing Inc. 12/31/84		ŀ			
Y Change in Ownership	Castna	head Gas	<u> </u>	onden#@te	nden <b>s</b> ate				
If change of ownership give name and address of previous owner									
II. DESCRIPTION OF WELL AND LE	EASE								
Lease Name	Well No. F	Poc. Name, inc		ormution		Kind of Lease	D	Lease No.	
D.C. Hardy	4	Drinkar	:d			State, Federal or Fee	F'ee ]		
Location 0 510		South	,		1980		East		
Unit Letter::	_ Fee   From	The South	Lin	e and		Feet From The			
Line of Section 20 Townshi	<u>,</u> 21S	Re	ng <b>e</b>	37E	, имр	м, Lea		County	
III. DESIGNATION OF TRANSPORT	TER OF O	IL AND NA	TURAI	GAS					
Name of Authorized Transporter of OH 🛣 Shell Pipeline Corp.	or Car	densate 🗍			P.O. Box	1910, Midland	, TX 79702		
Name of Authorized Transporter of Casingha TEXACO Producing Inc.	rad Gits 📆	or Diy Gas			P.O. Box	3000, Tulsa,		be sent)	
If well produces oil or liquids, give location of lants.	Sec. P 20		Rg. 37	le daz a	etwally connec Yes	ted? When	Urknown		
If this production is commingled with the	at from any	other lease o	or poel.	give com	mingling ord	er number:	PC-289		
				_					
NOTE: Complete Parts IV and V on	reverse sia	le if necessar	у.						
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION						
					$\wedge$	j.	6/1	85	
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				. \	.9				
my knowledge and belief.			BY JULIXION						
					DISTR	ICT I SUFERVISOR	₹		
	,			TITL			<del></del>		
W. B. hel				Т	his form is	to be filed in complis	ince with RULE	1104.	
				11	this is a re	quest for allowable for	or a newly drilled	l or deepene	
(Signature) well, this form must be accompanied by a tab tests taken on the well in accordance with a				with AULE 111.	THE GEATHIRG				
District Operations Manager All sections of this form must be filled out completely fo									
April 19, 1985				1		ecompleted wells.	-4 M (on also -		
(Date)				well n	ame or unup	Sections I. II. III. 4 er, or transporter, or o	ing yi ior change ther such change	of condition	
					eparate Form	ns C-104 must be fi	led for each poo	d in multipi	