

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

Operator  
Texaco Producing Inc.

Address  
P.O. Box 728, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas
	<input type="checkbox"/> Dry Gas
	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. M. Matkins	Well No. 1	Pool Name, including Formation Langlie Mattix 7-Rivers Queen	Kind of Lease State, Federal or Fee	Fee	Lease No.
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Location

Unit Letter M : 660 Feet From The South Line and 660 Feet From The West

Line of Section 14 Township 23S Range 36E , 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"/>	Address (Give address to which approved copy of this form is to be sent)
Texas N.M. Pipeline Co. (0055-1474)	P.O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texaco Producing Inc.	P.O. Box 3000, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	is gas actually connected? When
Unit <u>M</u> Sec. <u>14</u> Twp. <u>23S</u> Rge. <u>36E</u>	Yes <u>5/18/60</u>

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

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.

Alvin B. Bunting  
(Signature)  
District Administrative Supervisor  
(Title)  
December 30, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 8 1987, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT SUPERVISOR

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 multiple completed wells.

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

Form C-104  
Revised 10-01-78  
Format 05-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Texaco Producing Inc.

Address  
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)  
Gas Transporter Name Change

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. M. Matkins	Well No. 1	Pool Name, including Formation Langlie Mattix 7-Rivers	Kind of Lease State, Federal or Fee	FEE	Lease No.
Location Queen					
Unit Letter M	: 660	Feet From The South	Line end	660	Feet From The West
Line of Section 14	Township 23S	Range 36E	, 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"/> Texas N.M. Pipeline Co. (0055-1474)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM, 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX, 79762
If well produces oil or liquids, give location of tanks.	Unit : Sec. : Twp. : Rge. : M : 14 : 23S : 36E
Is gas actually connected?	When Yes : 5/18/60

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

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.

  
(Signature)  
District Administrative Supervisor

(Title)  
March 20, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 22 1986, 19

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

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 multiply completed wells.

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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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 ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
TEXACO Producing Inc.  
Address  
P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
 Other (Please explain)  
 Change of Operator from Getty to TEXACO Producing Inc. 12/31/84

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name J.M. Matkins	Well No. 1	Pool Name, including Formation Langlie Mattix 7-Riv. Queen	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line of Section 14 Township 23S Range 36E, 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"/> Texas New Mexico Pipeline Co. (0055-1474)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, N.M. 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762
If well produces oil or liquids, give location of tanks. Unit M Sec. 14 Twp. 23S Rge. 36E	Is gas actually connected? Yes When 5/18/60

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

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.

W. B. L. L.

(Signature)

District Operations Manager

(Title)

April 3, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 1985

BY J. M. L. L.  
TITLE DISTRICT 1 SUPERVISOR

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

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