

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OF OFFICE ADDRESS	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

Operator
TEXACO Inc.

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

Reason(s) for filing (Check proper box)		Other (Please explain)
☐ New Well	Change in Transporter of:	Change of Transporter from Getty Oil Co. to TEXACO PRODUCING INC. effective 6/1/85.
☐ Recompletion	☐ Oil	
☒ Change in Ownership	☒ Casinghead Gas	

change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
C.P. Falby "A" Federal	4	Drinkard	State, Federal or Fee
Location			FED LC-033706-(a)
Unit Letter	E	660	Feet From The West Line and 1980 Feet From The North
Line of Section	8	Township 22S	Range 37E, NMPM, Lea County

I. 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 sent)		
Shell Oil Co.	P.O. Box 1910, Midland, TX 79702		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
Texaco Producing Inc.	P.O. Box 3000, Tulsa, OK 74102		
Is well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	K	8	22S
			37E
Is gas actually connected?	When		
Yes	8/11/61		
this production is commingled with that from any other lease or pool, give commingling order number: PC-59			

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

I. 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. Loh
(Signature)
District Operations Manager
(Title)
6/1/85
(Date)

OIL CONSERVATION DIVISION	
JUL 22 1985	
APPROVED	19 85
BY <u>James Loh</u>	
TITLE	DISTRICT 1 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 IV for changes of owner, well name or number, or transportation or other such change of condition.	
Separate Forms OCM-4 must be filed for each pool in multi-completed wells.	