STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

(Date)

DISTRIBUTION		
BANTA PE		
PILE		
V.1.0.1.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
DPERATOR		
PROBATION OFFICE		

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

Separate Forms C-104 must be filed for each pool in multi; completed wells.

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Operator		
TEXACO Producing Inc.		
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 Operator from Getty to	
New York	TEXACO Producing Inc. 12/31/84	
	ndensale	
If change of ownership give name		
and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE	Kind of Lease No.	
Lease Name Well No. Pool Name, including 7 0	Semation	
Baker B 14 Blinebry O	11 & Gd5	
Location M 330 Feet From The South Line	510 Feet From The West	
Unit Letter From The Line	e and Feet From The	
10 Township 225 Ronge	37E NMPM, Lea Count	
Line of Section TO Township 225 Hangs		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS	
Name of Authorized Transporter of Oil [X] or Condensate	P.O. Box 1910, Midland, TX 79702	
Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas 🛆 or Dry Gas	P.O. Box 3000, Tulsa, OK 74102	
TEXACO Producing Inc	Is gas actually connected? When	
If well produces oil or liquids. Unit Sec. Twp. Rge.	Yes 3/17/80	
give location of tanks.	PC-582	
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.		
	OIL CONSERVATION DIVISION	
VI. CERTIFICATE OF COMPLIANCE	11	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED 6/1, 19 85	
complied with and that the information given is true and complete to the best of		
my knowledge and belief.		
	TITLE DISTRICT I SUPERVISOR	
w.B. hh	This form is to be filed in compliance with RULE 1104.	
W.D. non	we said to a request for allowable for a newly drilled or deepe:	
(Signature)	well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.	
District Operations Manager	All sections of this form must be filled out completely for all:	
April 16, 1985 (Tule)	able on new and recompleted wells.	
	Fill out only Sections I. II. III. and VI for changes of own	
(Date)	well name or number, or transporter, or other such change of conditi	