STATE OF NEW MEMOD ENERGY IND MINERALD DEPARTME	INT		Form C-194
OISTADUTION	OIL CONSERVATION DIVISION		Povised 10.01 75 Format 05-01-63 Page 1
PILE	P. O. BOX 2088 SANTA FE, NEW MEXICO 87501		
TRANSPORTER OIL			
PROMATION OFFICE	A A A A A A A A A A A A A A A A A A A	R ALLOWABLE AND PORT OIL AND NATURAL GAS	
I. Operator		. ORT OR AND NATURAL GAS	-
TEXACO Inc.			
Address P. O. Box 728, Hobbs,	New Mexico 88240		
Reason(s) for Isling (Check proper bo New Well Recompletion Change in Ownership	Change in Transporter of:	Other (Please explain) Change of Transporte to TEXACO PRODUCING	r from Getty Oil co. INC. effective 6/1/85
If change of ownership give name and address of previous owner	VD LEASE	3/1/88	
A.H. Blinebry Fed NCT	- · · · · · · · · · · · · · · · · · · ·	V State 1	• FED IC-032104
Unit Letter 0 5.66	0 Feet From The South Lir	ne andFeet From The	East
Line of Section 20 T	ownship 225 Range	38Е , ммрм, Lea	County
III. DESIGNATION OF TRANS	PORTER OF OIL AND NATURA	LGAS	
Name of Authorized Transporter of Of Texas N.M. Pipeline C	0. (0055-0070)	Address (Give address to which approved co. P.O. Box 2528, Hobbs, N.M.	88240
Name of Authorized Transporter of Co Texaco Producing Inc.	isinghead Gas 🗶 🔭 or Dry Gas 🔤	Address (Give address to which approved co P.O. Box 3000, Tulsa, OK 7	•
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rgs. H 19 22S 38E	Is gas actually connected? When	Not available
If this production is commingled w	ith that from any other lease or pool,		PC-244
NOTE: Complete Parts IV and	V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
	tions of the Oil Conservation Division have ion given is true and complete to the best of	APPROVED	6/1 . 19 85

jł.

w.b. h.h

my knowledge and belief.

(Signature) District Operations Manager 6/1/85

(Dale)

APPROVED \_\_\_\_\_\_\_ 6/1 . 19 85\_\_\_\_\_ BY\_\_\_\_\_\_ DISTRICT I SUFERVISOR

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

If this is a request for showshis for a newly drilled or descence well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULX 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. U. 12. and VI for changes of owner well name or number, or transportantor timer such change of condition

Separate Forma C-104 must be lived for each poor in multiplicamoisted weils.

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