IN IN STATE OF NEW IN INC. 1111 - HAM MINGRALD, 10846TMENT			•				
						Etrin Clink	
0161 B/BUTICE						Povision 1001 TB Format 66-01-60	
	OIL CONSERVATION DIVISION					Page 1	
1.8	P. O. BOX 2088						
·/.s u.a,	SANTA FE, NEW MEXICO 87501						
AND CFFICE	• .						
TRANSPORTER LOL							
RECUEST FOR ALLOWABLE							
PROBATION GPFICE	AUTHORIZA	TION TO TRAN		AND NATU	RAL GAS		
					· · · · · ·		
Opersion				•			
TEXACO Inc.							
Addrees 720 H LL X		aa (a					
P. O. Box 728, Hobbs, Ne	W Mexico 8	8240					
(asson(s) for filing (Check proper box) Other (Please explain)						······································	
New Well	Change in Transporter of:			lhange o	f Transporter	from Getty Oil Co.	
Recompletion	011		Dry Gas	to texac	O PRODUCING I	NC. effective 6/1/85.	
Change in Ownership	XCasinghe	ad Gas	Condensate				
I. DESCRIPTION OF WELL AND		bi Name, including	Formation	8543 21,48	Kind of Lease	Lease No.	
A.H. Blinebry Fed NCT-	1 15 Dr	rinkard Stru	nor Die	Kard alis	State, Federal or Fee	Fed - IC-032104	
Location			•				
Unit Letter;;330;	Feet From Ti	West L	ine and <u>3</u>	30	-Feel From The _N	orth	
Line of Section 33 Towns	thip 22S	Range	38	Е , ммрм.	Lea	County	
II. DESIGNATION OF TRANSPO				Cive address t	- which approved app		
				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 Casin	ghedd Gas (<u>X A</u>	or Dry Cas	1			r of this form is to be sent)	
Texaco Producing Inc.				*····	Tulsa, OK 74	102	
	Jnit Sec. F 33	Twp. Rq. 22S 38E		tuaily connecte	d? j ^{When}	2/74/62	
live location of tanks.		223 JOE	Yes		3/14/62		
this production is commingled with	that from any ot	ther lesse or pool	, give comm	ningling order	number:	PC-21	
OTE: Complete Parts IV and V	on reverse side	if necessary.					
1. CERTIFICATE OF COMPLIAN	се СЕ			OIL CO	DNSERVATION.	IVISIONIDOE	
			.	\wedge	" JU	1 7 7 1900	
hereby certify that the rules and regulations	s of the Oil Conser	vation Division have	APPR	q∕v <i>q</i> ′¤		6/1 , 19 85	
een complied with and that the information y knowledge and belief.	given is true and co	implete to the best of	9Y	Lini	1200	~	

W.D.

(Signature)

strict Operations Manager Tilles

1/05

Sales

DISTRICT I SUFERVISOR TITLE

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

If this is a request for allowable 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 AULY 111.

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

Fill out only Sections I. II. (II. and Villor changes of owner well name or numbers, or transporten or other such change of condition

Separate Froma C+.C4 must be filed for esch pool in mutic. Il compisied weild.