

RECEIVED		
SECTION		
DATE		
ENTER	OIL	
	GAS	
OFFICE		

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

CO PRODUCING INC.

. Box 728, Hobbs, New Mexico 88240

1) For filing (Check proper box)

• Well
completion
since in Ownership

Change in Transporter of:

Oil

Castinghead Gas

☐ Dry Gas

☐ Condensate

Other (Please explain)

Change of Operator from Getty to
TEXACO PRODUCING INC. effective 6/1/85

ge of ownership give name
dress of previous owner _____

DESCRIPTION OF WELL AND LEASE

Name J.V. Baker	Well No. LPG3	Pool Name, including formation Salt	State, Federal or Fee Fee
Direction E 2310 North 1590 West at Letter : Feet From The Line and Feet From The			
Line of Section 27 Township 22S Range 37E, NMPM, Lea County			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Is it Authorized Transporter of Oil <input type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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N/A LPG Storage Well

Is of Authorised Transporter of Casinghead Gas ☐ or Dry Gas ☐ : Address (Give address to which approved copy of this form is to be sent)

Well produces oil or fluids, or location of tank.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
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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

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)

Project Operations Manager

Chiles

62,95

(Date)

OIL CONSERVATION DIVISION

APPROVED _____ 6/1, 1985

BY [Signature]
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 III.

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

Fill out only Sections I, II, IV, 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.