

NEW WELL	
RECOMPLETION	
CHANGE IN OWNERSHIP	
CHANGE IN TRANSPORTER	
TRANSPORTER	
OPERATOR	
OPERATION OFFICE	

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

Form O-104
Revised 10-01-75
Format 09-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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 ☐ Dry Gas	
Change in Ownership	☒ Casinghead Gas ☐ Condensate	

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
A.H. Blinbry Fed NCT-4	4	Drinkard	State, Federal or Fee FED LC-032	04
Location				
Unit Letter	M	990	Feet From The	South
Line of Section	31	Township	22S	Range
			38E	Lea
				County

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)
Texas N.M. Pipeline Co. (0055-1420)	P.O. Box 2528, Hobbs, N.M. 88240
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
Well produces oil or liquids, or location of tanks.	Is gas actually connected? When
Unit Sec. Twp. Rge. N 31 22S 38E	Yes 7/7/64

If production is commingled with that from any other lease or pool, give commingling order number: PC-63

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

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

1/85

Date

OIL CONSERVATION DIVISION

APPROVED *JUL 1 1985* 19 85
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 111.

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

Fill out Sections I, II, III, and IV for changes of ownership, well name or location, transporter or other such change of condition.

Separate Form O-104 must be filed for each pool in multiple completed wells.