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U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

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

Form O-104  
Revised 10-6-75  
Formal 05-01-23  
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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)

- ☐ New Well  
☐ Recompletion  
☒ Change in Ownership

Change in Transporter of:

- ☐ Oil  
☒ Casinghead Gas  
☐ Dry Gas  
☐ Condensate

Other (Please explain)

Change of Transporter from Getty Oil Co.  
to TEXACO PRODUCING INC. effective 6/1/85.

Change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
A.H. Blinbry Fed NCT-1	19	Drinkard <i>Drunkard</i>	State, Federal or Fee	FED LC-032104
Location	Unit Letter	Feet From The	Line and	Feet From The
	D	660	West	660
			Line and	North
	29	Township	22S	Range
			38E	NMPM, Lea
				County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas N.M. Pipeline Co. (0055-1405)	P.O. Box 2528, Hobbs, N.M. 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texaco Producing Inc.	P.O. Box 3000, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	29	22S	38E	Yes	10/1/65

If this production is commingled with that from any other lease or pool, give commingling order number: PC-29

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

I. 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)

(Date)

OIL CONSERVATION DIVISION

APPROVED *[Signature]* 6/1, 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 only sections I, II, III, and IV for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms 0-104 must be filed for each pool in multiple-completed wells.