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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form O-104  
Revised 10-01-78  
Format 06-01-63  
Page 1

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)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

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

I. DESCRIPTION OF WELL AND LEASE

Lease Name A.H. Blinbry Fed NCT-1	Well No. 18	Pool Name, including Formation Blinbry Oil & Gas	Kind of Lease State, Federal or Fee	Lease No. Fed LC-032104
Location Unit Letter M ; 660 Feet From The South Line and 660 Feet From The West Line of Section 20 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"/> Texas N.M. Pipeline Co. (0055-0070)	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 Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rqs. H 19 22S 38E
Is gas actually connected?	When Yes 10/3/64

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

PC-244

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

III. 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. L. L.

(Signature)

District Operations Manager

(Title)

6/1/85

(Date)

OIL CONSERVATION DIVISION

APPROVED 6/1, 1985

BY *James L. L.*  
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 allow-  
able on new and recompleted wells.

Fill out only sections I, II, III, and IV for changes of owner,  
well name or number, transporter, or other such change of condition.

Separate Forms O-104 must be filed for each pool in multi-  
completed wells.