

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

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

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)		
<input type="checkbox"/> New Well	Change in Transporter of:	Change of Transporter from Getty Oil Co. to TEXACO PRODUCING INC. effective 6/1/85.		
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil			<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas			<input type="checkbox"/> Condensate

Change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name <u>A.H. Blinebry Fed NCT-1</u>	Well No. <u>26</u>	Pool Name, including Formation <u>Blinebry Oil &amp; Gas</u>	Kind of Lease <u>State, Federal or Fee Fed IC-032104</u>	Lease No.
Location				
Unit Letter <u>B</u>	: <u>1980</u>	Feet From The <u>East</u>	Line and <u>660</u>	Feet From The <u>North</u>
Line of Section <u>29</u>	Township <u>22S</u>	Range <u>38E</u>	<u>NMPM</u>	Lea County

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)
<u>Texas N.M. Pipeline Co. (0055-1405)</u>	<u>P.O. Box 2528, Hobbs, N.M. 88240</u>
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)
<u>Texaco Producing Inc.</u>	<u>P.O. Box 3000, Tulsa, OK 74102</u>
Does well produce oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>F</u> Sec. <u>29</u> Twp. <u>22S</u> Rge. <u>38E</u>	Yes <u>7/10/65</u>

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.

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. hsh

(Signature)

District Operations Manager

(Title)

6/1/85

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 22 1985 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 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.