

BY STATE OFFICE	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form OCM
Revised 10/1/78
Form 16-01-23
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)
☐ 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

Well Name W.L. Nix	Well No. 4	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter B ; 2310 Feet From The East Line and 660 Feet From The North Line of Section 20 Township 22S Range 38E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas N.M. Pipeline Co.	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 ☒ or Dry Gas ☐ Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102					
Well produces oil or liquids, or location of tanks.	Unit C	Sec. 20	Twp. 22S	Rge. 38E	Is gas actually connected? Yes	When 6/11/65

If this production is commingled with that from any other lease or pool, give commingling order number: **CTB-143**

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
6/1/85
(Date)

OIL CONSERVATION DIVISION

APPROVED **6/1**, 19 **85**
BY **James L. Loh**
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1102.
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 allowables on new and recompleted wells.
Fill out only sections I, II, III, and IV for changes of ownership, well name or number, or transporter, or other such change of condition.
Separate Forms OCM must be filed for each pool in multiple-completed wells.