## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		
BANTA PE		
FILE		
W.B.O.A.		
LAND OFFICE		
TRANSPORTER	DIL	
	GAB	
OPERATOR		
PRORATION OFFICE		

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiper completed wells.

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I.			
Operator			
TEXACO Producing Inc.			
P. O. Box 728, Hobbs, New Mexico 88240			
Reuson(s) for living (Check proper box)	Other (Fleuse explain)		
New Well Change in Transporter of:	Change of Operator from Getty to		
Recompletion Oil Dr	y Gas TEXACO Producing Inc. 12/31/84		
Change in Ownership Casinghead Gas Co	pdenegte		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE	permation   Kind of Lease   Lease No		
Leose Name Well No. Pool Name, including Fo			
Myers Langlie Mattix Unit   38   Langlie Mattix	k 7-Riv. Cupan State, Federal of Feb. NM2 1644		
Location	CCO Engt		
Unit Letter P: 660 Feet From The South Line and 660 Feet From The East			
Line of Section 25 Township 23S Range	36E , NMPM, Lea County		
Line of Section 23 Township 233 Name 302 / Name 200			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil Q or Condensate Address (Give address to which approved copy of this form is to be sent)			
Texas New Mexico Pipeline Co. (0055-2174)	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)		
El Paso Natural Gas Co.	P.O. Box 1492, El Paso, TX 79978		
If well produces oil or liquids, Unit Sec. Twp. Rge.	Is gas actually connected? When		
give location of tanks. G 5 24S 37E	Yes Unknown		
If this production is commingled with that from any other lease or pool, give commingling order number:			
NOTE: Complete Parts IV and V on reverse side if necessary.			
	II OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	Ole School Artist British		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED June 1, 19 85		
complied with and that the information given is true and complete to the best of			
my knowledge and belief.	BY SUPERVICOR		
_	TITLE DISTRICT I SUFERVISOR		
This form is to be filed in compliance with RULE 1104.			
W. D. William of the first and the state of			
(Signature)	wall, this form must be accompanied by a tabulation of the deviation		
District Operations Manager	tests taken on the well in accordance with AULE 111.  All sections of this form must be filled out completely for allow		
April 3, 1985	sble on new and recompleted wells.		
White 2, 1202	Fill out only Sections 1, II. III, and VI for changes of owne		
(Date) well name or number, or transporter, or other such change			