STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

DISTRIBUTION					
BANTA FE					
FILE					
V.S.G.S.					
LAND OFFICE					
TRANSPORTER	DIL				
	BAB				
OPERATOR .					
PRORATION OF					

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

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

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

REQUEST FOR ALLOWABLE

PRORATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
<u>I </u>								
Operator					•			
TEXACO Producing Inc.								
P. O. Box 728, Hobbs, New	w Mexico 88240					<u> </u>		
Reuson(s) for filing (Check proper box)	x)			Other (Please explain) Change of Operator from Getty to				
New Well	Change in Transport		meyaco Producing Inc 12/31/84					
Recompletion	[OII	—	Gas ndensate	11111100	rioducii	19 1110 1		
X Change in Ownership	Casinghead Gas							
If change of ownership give name and address of previous owner								
•	T 1 CT						-	
II. DESCRIPTION OF WELL AND I	LEASE Well No. Pool North	e, including Fo	rmation		Kind of Lease	Fee	Lease No.	
Skelly Penrose "A" Un	it 26 Langl	lie Matt	ix 7-	Riv.Om	State, Federal	or Fee		
Location 1 OII	110 20 1 200.09		•					
Unit Letter J : 1980	_ Feet From The SOU	ith_Line	and 19	080	Feet From Ti	h• <u>East</u>		
Our Court					Le	a	County	
Line of Section 3 Towns	hip 23S	Range	37E_	, NMF	′м,			
III. DESIGNATION OF TRANSPOL	DTED OF OH AND	NATTIRAT	GAS					
Name of Authorized Transporter of Oil	or Condensate		Address	(Give addres	s to which approve	ed copy of this form i	s to be sent)	
Injection						- Color form	to be tent!	
Name of Authorized Transporter of Casing	head Gas Or Dry	y Gas 🗀	Address	(Give addres	s to which approve	ed copy of this form i	1 10 00 10,	
			1	tually conne	cied? When	n		
If well produces oil or liquids,	init Sec. Twp	, Rg∎.	18 628 6	ruany comic	1			
give location of tanks.		i	<u> </u>		for number:			
If this production is commingled with t	that from any other le	ease or pool,	give com	minging or	rei number			
NOTE: Complete Parts IV and V of	on reverse side if new	cessary.						
				OIL	CONSERVAT	ION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	JE				June l. /		. 85	
I hereby certify that the rules and regulations	of the Oil Conservation	Division have	APPR	9V#D	oune 17	12.	_, 19	
been complied with and that the information g my knowledge and belief.	given is true and complete	e to the pest of	BY_	LUM	1120	(m)		
my knowledge and better.				DIST	HCT I SUFERI	VISOR		
			TITL	<u> </u>				
w.B. he						ompliance with AU		
				his form m	set he accompan	able for a newly draied by a tabulation	of the deviction	
(Signorum District Operations Mana			tests	taken on th	e well in accord	isace with RULE	111.	
District Operations Mana			Able	il sections	of this form must recompleted wel	it be filled out com	bingery for mires	
March 27, 1985			! -	ill and only	Sections I II	III. and VI for ch	renwe to segmen	
(Date)			well n	ame or num!	ber, or transporte	r, or other such cha	inge of condition	

