STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

	4 74 6 9		
DISTRIBUTION			
BANTA FE			
FILE			
V.S.O.S.			
LAND OFFICE			
TRANSPORTER	DIL		
	BAS		
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 multiply completed wells.

REQUEST FOR ALLOWABLE

	PORT OIL AND NATURAL GAS	
Operator		
TEXACO INC.	•	
P. O. Box 728, Hobbs, New Mexico 88240		
Resson(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	Change of Operator from Getty to	
	TEXACO INC effective 12/31/84	
Change in Ownership Casinghead Gas Ca	ondens@le	
If change of ownership give name and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE	ormation Kind of Lease FQE Lease No.	
Lease Name Well No. Pool Name, Incleding F Skelly Penrose "A"Unit 62 Langlie Matt	ix 7-Riv.Queerstore, Federal or Fee	
Location		
1	e and 2200 Feet From The West	
Unst Letter K : 2200 Feet From The South Lin		
Line of Section 3 Township 23S Range 3	7E , NMPM, Lea County	
Name of Authorized Transporter of Oil or Condensate Shell Pipeline Corp. Name of Authorized Transporter of Casinghead Gas or Dry Gas TEXACO Inc. If well produces oil or liquids, give location of tanks. I 4 23S 37E	P.O. Box 3000, Tilsa, OK 74102 Is gas actually connected? Yes Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tilsa, OK 74102	
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.	11	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION APR 2 1985	
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.	APPROVED APR 2 1985 BY DISTRICT 1 SUFERVISOR	
w.B. hh	This form is to be filed in compliance with RULE 1104.	
W. D. Communication (Signature)	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	
District Operations Manager	tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for allow-	
March 27, 1985	able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner,	
(Date)	well name or number, or transporter, or other such change of condition.	

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