## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

| <b>40. 00 300M2 DEEETISS</b> |     |  |  |  |
|------------------------------|-----|--|--|--|
| DISTRIBUTION                 |     |  |  |  |
| BANTA FE                     |     |  |  |  |
| FILE                         |     |  |  |  |
| V.S.D.A.                     |     |  |  |  |
| LAND DIFICE                  |     |  |  |  |
| TRANSPORTER                  | DIL |  |  |  |
|                              | TAD |  |  |  |
| 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

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 flied for each pool in multiply completed wells.

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| PRORATION OFFICE  | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS |                                  |  |                |  |
|---|--|----------------------------------|--|----------------|--|
| 1.  |  |                                  |  |                |  |
| Operator  | •  |                                  |  |                |  |
| TEXACO Producing Inc.   |  |                                  |  |                |  |
| P. O. Box 728, Hobbs, New   | Mexico 88240                                   |                                  |  |                |  |
| Reason(s) for filing (Check proper box)   |  | Other (Pleas                     | e explain!                             |                |  |
| New Well  | Change in Transporter of:                      | Change of Operator from Getty to |  |                |  |
| Recompletion  |  | TEXACO                           | Producing Inc. 12/31/                  | '84            |  |
| X Change in Ownership   | Castnehead Gas                                 | Condensate                       |  |                |  |
|   |  |                                  |  |                |  |
| If change of ownership give name  |  |                                  |  |                |  |
| and address of previous owner   |  |                                  |  |                |  |
| II. DESCRIPTION OF WELL AND LE  | ASE  |                                  |  |                |  |
| Lease Name  | Well No. Pool Name, Including F                |                                  | Kind of Lease                          | Lease No.      |  |
| West Dollarhide Drink.Unit  | 74 Dollarhide T                                | Tubb-Drinkard                    | Stone, Federal or Fee State            | <u> _B1732</u> |  |
| Location  | 37 43  |                                  | <b></b>                                |                |  |
| Unii Letter C : 667   | Feet From The North Lie                        | ne and <u>631</u>                | Feet From The East                     |                |  |
| 4   | 250  | 2017                             | . Too                                  |                |  |
| Line of Section 4 Township  | , 25S Range 3                                  | 38E , NMPN                       | , Lea                                  | County         |  |
|   |  |                                  |  |                |  |
| Name of Authorized Transporter of Oil X   | or Condensate                                  | L GAS Andress (Give address      | to which approved copy of this form is | to be sent)    |  |
| Texas New Mexico Pipeline   | _  |                                  | , Hobbs, N.M. 88240                    | •              |  |
| Name of Authorized Transporter of Casinghe  |  | Address (Give address            | to which approved copy of this form is | to be sent)    |  |
| El Paso Natural Gas Company   |  |                                  | , El Paso, Texas 79978                 |                |  |
| Unit  |  | Is gas actually connect          |  |                |  |
| If well produces oil or liquids, give location of tanks.  | 32 24S 38E                                     | Yes                              | NA.                                    |                |  |
| <u> </u>  |  |                                  | r number:                              |                |  |
| If this production is commingled with the   |  | Elas Committeeting over          |  | <u> </u>       |  |
| NOTE: Complete Parts IV and V on  | reverse side if necessary.                     |                                  |  |                |  |
| THE CONTROL OF COMPUTANCE   |  | OIL CONSERVATION DIVISION        |  |                |  |
| VI. CERTIFICATE OF COMPLIANCE   |  |                                  |  |                |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have                   |  | APPROVED                         | 6/1                                    | , 1985         |  |
| been complied with and that the information give<br>my knowledge and belief.                            | in is true and complete to the best of         | DISTRICT I SUPERVISOR            |  |                |  |
| my knowledge and benefi.  |  |                                  |  |                |  |
| ,   |  | TITLE DISHM                      | LI I SUPERVISUR                        |                |  |
| w.B. hh   |  | This form is to                  | be filed in compliance with aug        | E 1104.        |  |
| W.D. Car  | <b>~</b>                                       | 11                               | sest for allowable for a newly drill   |                |  |
| (Signature) well, this form must be accompanied by a tabulation of                                      |  |                                  | of the deviation                       |                |  |
| District Operations Manager   |  |                                  |  |                |  |
| April 2, 1985  All sections of this form must be filled out complete able on new and recompleted wells. |  |                                  | story for Ellow                        |                |  |
| 14/14 by 1/00   | ,  |                                  |  | _              |  |

MAY 31 1985