

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS	
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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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator ARCO Oil and Gas Company
Division of Atlantic Richfield Company

Address P. O. Box 1710, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) Effective 1/01/85
Getty Trading and Transportation Co. name
changed to: Texaco Trading and Trans-
portation Company

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>John P. Combest WN</u>	Well No. <u>5</u>	Pool Name, including Formation <u>Langlie Mattix SRQ</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No. _____
Location				
Unit Letter <u>I</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>35</u> Township <u>23S</u> Range <u>36E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texaco Trading and Transportation Company</u>	<u>P. O. Box 6196, Midland, Texas 79711</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>P. O. Box 1384, Jal, New Mexico 88252</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>I</u> Sec. <u>35</u> Twp. <u>23S</u> Rge. <u>36E</u>	<u>Yes</u> <u>7/30/81</u>

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.

VI. 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.

Stephen Dickson
(Signature)
Services Supv.
(Title)
1/14/86
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 20 1986, 19_____
BY ORIGINAL SIGNED JERRY LEXTON
DISTRICT I SUPERVISOR
TITLE _____

This form is to be filed in compliance with RULE 1104.

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 allowable on new and recompleted wells.

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 filed for each pool in multiply completed wells.