STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	

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

DISTRIBUTI	DN		
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PILE			
V.8.0.A.			
LAND OFFICE			
TRANSPORTER	OIL		
OPERATOR			
PROPATION OFFICE			

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.		
Operator		
TEXACO Producing Inc.		
Address		
P. O. Box 728, Hobbs, New	Mexico 88240	
Resson(s) for filing (Check proper box)		Other (Please explain)
	Change in Transporter of:	Change of Operator from Getty to
New Well		TEXACO Producing Inc ^{12/31/84}
Recompletion		
Y Change in Ownership	Casinghead Gas Condensate	
If change of ownership give name and address of previous owner II, DESCRIPTION OF WELL AND LI	EASE	IX ind of Lease No.
Lecse Name	Well No. Poor Name, Including Formation	
Cooper Jal Unit	235 Jalmat Yates 7-River	S State, Federal or Fee FED-NM-0321613
	South Eine and	660 Feel From The West
Line of Section 18 Townsh	p 24S Range 37E	, NMPM, Lea County
III. DESIGNATION OF TRANSPOR	or Condensate	(Give address to which approved copy of this form is to be sent) (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casingh		

Is gas actually connected?

give location of tanks. If this production is commingled with that from any other lesse or pool, give commingling order number:

Twp.

Sec.

Rge.

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Unit

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

If well produces oil or liquids,

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.

W.B. C

(Signalwe)

District Operations Manager (Tule)

April 11, 1985

(Daie)

DIL CONSERVATION DIVISION 85 June APPO R SUFERVISOR 1 DISTRICT TITL

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

If this is a request for allowable for a newly drilled or despende 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.

RECEVED MAY 31 1985

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