STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT			Form C-104
			Revised 10-01-78
DISTRIBUTION OIL CONSERVATION DIVISION			Format 06-01-83 Page 1
SANTA /8 P. 0. BOX 2088			
PILE	SANTA FE, NEW	/ MEXICO 87501	-
LAND OFFICE			
TRANSPORTER DIL			
	REQUEST FOR	ALLOWABLE .	
PROPATION OFFICE	• • •	PORT OIL AND NATURAL GAS	
I			
Operator			
TEXACO Producing Inc.	•		
Address	Novi og 88240		
P. O. Box 728, Hobbs, Ne		Other (Please explain)	
Reason(s) for filing (Check proper box)		Change of Operator f	rom Getty to
New Well	Change in Transporter of:	TEXACO Producing I	
Recompletion		ndensale	
Change in Ownership			
If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND	IEASE		
Lease Name	Well No. Poor Name, Including Fo	ormation Kind of Lease	Lease No.
Cooper Jal Unit	108 Langlie Mattiz	7-River Queen Store, Federal or Fe	• FEDERAL-NMU321613
Location		-	West
Unit Letter L : 1980	Feet From The South Lin	e and660Feet From The	
Line of Section 18 Town	ship 245 Range	37E , NMPM, Lea	County
III. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL	GAS	
Name of Authorized Transporter of Oil	or Condensate	Againess (Give address to which approved copy of this form is to be boild	
Shell Pipeline Company		P.O. Box 1910, Midland, TX 79702 Address (Give address to which approved copy of this form is to be serie)	
Name of Authorized Transporter of Castr			
El Paso Natural Gas Compa		P.O. Box 1492, El Paso, "	17 19976
If well produces oil or liquids,	Unit Sec. Twp. Rgs.		
give location of tanks.	J 24 24S 36E	Yes Unkno	wn
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 COMPLIAN	CE	OIL CONSERVATION	DIVISION
• • • · · · · · · · · · · · · · · · · ·	e of the Oil Contemption Division have	APPROVED June 1,	
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		Lange Ant	۷.
my knowledge and belief.		BY	
	· · · · · · · · · · · · · · · · · · ·	TITLE DISTRICT I SUFERVISO	R
w. b. h.			ADCA WITH BUILT 1104
W.D. hr	\sim	This form is to be filed in compli If this is a request for allowable i	
(Signatu		walt this form must be accompanied b	y a tabulation of the deviation
District Operations Man		tests taken on the well in accordance	with RULE 111.
_ District operations han. (Tule)		All sections of this form must be sole on new and recompleted wells.	inted ont combinies to stice

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April 11, 1985

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(Date)

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.

RECEIVED MAY 31 1985