#### STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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

DISTRIBUTION					
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FILE					
.t.o.t.					
LAND OFFICE					
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OPERATOA					
PROBATION CFFICE					

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

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

I	······································							
TEXACO Producing Inc. Address P. O. Box 728, Hobbs, New	Mexico 88240							
Reeson(s) for filing (Check proper box)   New Well   Recompletion   X	Change in Transporter of: Oil Casinghead Gas		Other (Plea Change TEXACO	of Operator from Producing Inc.	Getty to 12/31/84			
If change of ownership give name and address of previous owner								
<b>II. DESCRIPTION OF WELL AND L</b>	EASE Well No.   Foos Name, Inc	luding Formation		Kind of Lease	Tee	Lecs.		

Lease Name			1 HEII 1101 1	at Yates	Formation 7-River:	S	State, Federal or Fee	Fee	
South :	Langlie Ja	990		South	•	2310	Feet From The	West	
Unit Lette	N 	;	Feel From The_ 25S	L	ine and 37E	NMPM	- Iea		County
Line of Se	O ection	Townsh	1p	Ronge			· · ·		

## IN OF TRANSPORTER OF OIL AND NATURAL GAS

TT DECICALATION OF TRANS	PORTER	OF OIL	AND NA	TURAL	GAS   Aggings (Give address to which approved copy of this form is to be sent)
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL				Asaress (Give address to which approved to the Topoto	
Name of Authorized Transporter of othe				P.O. Box 1910, Midland, TX 79702	
Shell Pipeline Company					Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas X or Dry Gas				P.O. Box 1492, El Paso, TX 79978	
FI Paso Natural Gas Company				Is gas octually connected? When	
	Unit	Sec.			1 1949
If well produces cli er liquide,	. т	1 7	255	• 37E	Yes
give location of tanks.					

If this production is commingled with that from any other lesse 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.

W.B.

(Signalwe) District Operations Manager (Tule)

April 12, 1985

(Date)

OIL CONSERVATION DIVISION **, 19** .85 6/1 APPR BY DISTRICT I SUFERVISOR 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 AULE 111.

All sections of this form must be filled out completely for allow able 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 multiple completed wells.