STATE OF NEW MEXICO						Form C-104 Revised 10-01-78 Formet 06-01-83
DISTRIBUTION	011	CONSERVA	TION	DIVISIO	N	Page 1
BANTA FE	OIL CONSERVATION DIVISION Page 1 P. O. BOX 2088					
FILE		NTA FE, NEW		0 87501		
U.B.G.B.	SA	NTA FE, NEW				*
LAND OFFICE	• .					
TRANSPORTER DIL		REQUEST FOR		ABLE		
PROBATION OFFICE	AUTHORIZA	AN TION TO TRANSF	ND PORT OIL	AND NATUR	AL GAS	
I.						
Operator TEXACO Producing In Address		8240				
P. O. Box 728, Hobk Reason(s) for filing (Check prop New Well Recompletion X Change in Ownership		insporter of:	y Gas ondensale	Other (Please Change O TEXACO I	explain) of Operator from Producing Inc.	Getty to 12/31/84
If change of ownership give n and address of previous owne II. DESCRIPTION OF WEL Lease Name A.B. Coates "C"	L AND LEASE	S. Nome, Including F Tustis Ellenb			Kind of Lease State, Federal of Fee	FED-LC-032650 ()
Location T · ·	990 Feel From T	heEast	• and	980	Feel From The	outh
Unit Letter;_	Township 25S		37E	, NMPM	Loa	Court
Line of Section 24 III. DESIGNATION OF TH Name of Authorized Transporte Shell Pipeline Con Name of Authorized Transporte	ANSPORTER OF OIL r of CII C or Conde P. C.		.O.	Box 1910,	Midland, TX 797 Midland, TX 797 to which approved copy of , El Paso, TX 75	702 This form is to be sent)
El Paso Natural Ga				ctually connect		
If well produces oil or liquids, give location of tanks.	Unit Soc. B 24	Twp. Rge. 25 37	Yes		1	1958
If this production is comming	ied with that from any c	other lease or pool,	give con	mingling orde	r number:	R-1330A
	V and V on reverse side					
VI. CERTIFICATE OF CO	MPLIANCE				ONSERVATION DI	VISION - 6/1 , 85
I hereby certify that the rules and been complied with and that the u	regulations of the Oil Conse Mormation given is true and e	ervation Division have complete to the best of	APP	VED	1 Letim	, 12

WB. hh

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my knowledge and belief.

(Signature)	
District Operations Manager	
(Tule)	
April 24, 1985	
(Delej	

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 deepe well, this form must be accompanied by a tabulation of the devia: tests taken on the well in accordance with RULZ 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owwell name or number, or transporter, or other such change of condit

Separate Forma C-104 must be filed for each pool in mult completed wells.

