STATE OF NEW MEXICO				•					
ENERGY MO MINERALS DEPARTMENT							1	Form C-104	
00. 00 500 0 5112 11 50								Revised 10-01- Format 06-01-8	-
	OIL CONSERVATION DIVISION							Page 1	~
File	P. O. BOX 2088							•	
U.S.C.A.	SANTA FE, NEW MEXICO 87501							-	
LAND OFFICE	•	•					•		
BAL		REQUES	ST FO	R ALLOW	ABLE				
AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
I.	AUTHOR	RIZATION TO T	KANSI	PORTUI	AND NATU	IRAL GAS			
Operator									
TEXACO Producing Inc.			<u> </u>				- <u></u>	<u></u>	
P. O. Box 728, Hobbs, Ne	w Mexico	0 88240							
Reeson(s) for filing (Check proper box)					Other (Please		from C		
New Voll	Change in Transporter of: Change of Operator from Getty to TEXACO Producing Inc. 12/31/84								
Recompletion									
Y Change in Ownership		ingheod Gas			L				
If change of ownership give name									
and address of previous owner					<u> </u>		•		
II. DESCRIPTION OF WELL AND									
Lecse Name		Fooi Name, Incis				Kind of Lease State, Federal or	Fee The		Lease No.
Cooper Jal Unit	236	Jalmat Yate	es /-	-Rivers		State, recerci di	F•• Fe	e]	
Location C 660		North	n	-	L980	Feel From The	West		
Unit Letter:	Feel Fro	om The	Lin	e and		Feel From The			
Line of Section 24 Towns	ыр 24S	Rang	qe	36	5E , NMPM		Lea		County
			-						
IIL DESIGNATION OF TRANSPOL			URAL	GAS	Cum andress	to which approved i	ary of this	form is to	be sent)
Name of Authorized Transporter of Cil [Injection	j or C	iondensale 🛄		ADGIERE				,	•••••
Name of Authorized Transporter of Casing	head Gas	or Dry Gas		Address (Give address i	to which approved a	copy of this	form is to	be sentj
			_						
If well produces oil or liquids,	nit Sec	Twp. Ro	çe.	ls gas oc	luaily connect	d? When			
give location of tanks.									
If this production is commingled with t	hat from an	y other lesse or	pool.	give comm	ungling order	number:			
NOTE: Complete Parts IV and V o	n reverse s	ide if necessary.				١			
VI. CERTIFICATE OF COMPLIANCE						ONSERVATION		•	
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.				APPRO		une 1,			9 <u>85</u>
				BY ELMI Section					
				1 7	DIETON	T I SUFERVIS	<u></u>		
				TITLE	ENS HAL	1 1 207 13.413	<u> </u>	<u></u>	
w.b.hh				Th	is form is to	be filed in comp	liance wit	th RULE 1	104.
				If this is a request for allowable for a newly drilled or deepenc well, this form must be accompanied by a tabulation of the deviatio					
(signature)				well, th tests te	is form must ken on the v	be accompanied vall in accordance	by m tabu s with At	JEE 111.	WA MEATBLIC
District Operations Mana	JEI		[]			Abd	filled and		ty for allos

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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.

(Date)

April 11, 1985

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