STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

44. 94 EDPIED DECENTED			
DISTRIBUTION			
BANTA FE			
FILE			
U.S.O.A.			
LAND OFFICE			
TRANSPORTER	DIL		
	BAN		
OPERATOR			
PROBATION OFFICE			

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I				
Operator				
MEXACO Producing Inc.				
P. O. Box 728, Hobbs, New	Mexico 88240			
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well	Change in Transporter of:	Change of Operator from Getty to		
Recompletion	[] IIO	TEXACO Producing Inc. 12/31/84		
X Change in Ownership	Casinghead Gas	ondensate		
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LI	EASE Well No. Pool Name, Including F	ormation Kind of Lease Faderal Lease No		
Mattix Unit	1	retrix 7-Riv.Queen, Federal or Fee LC-032339 (B)		
Location	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
	Feet From The North Lu	ne and 2080 Feet From The West		
Line of Section 10 Townshi	p 24S Range	37E , NMPM, Lea County		
III. DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil Injection Name of Authorized Transporter of Casinghi	or Candensats	Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) Is gos actually connected? When		
If well produces oil or liquids, give location of tanks.				
If this production is commingled with the NOTE: Complete Parts IV and V on		give commingling order number:		
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of been complied with and that the information giv my knowledge and belief.	en is true and complete to the best of	BY DISTRICT I SUPERVISOR		
w.B. hl		This form is to be filed in compliance with RULE 1104.		
(Signature)		If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.		
March 27, 1985 (Tule)	er	All sections of this form must be filled out completely for alloable on new and recompleted wells.		
(Date)		Fill out only Sections I, II, III, and VI for changes of owns well name or number, or transporter, or other such change of condition		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	Separate Forms C-104 must be filed for each pool in multip completed wells.		

MAY 31 1985