STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT Form C-104 Revised 10-01-78 -----Format 06-01-83 OIL CONSERVATION DIVISION DISTRIBUTION Page 1 SANTA PE P. O. BOX 2088 FILE SANTA FE, NEW MEXICO 87501 V.1.0.4. LAND OFFICE DIL TRANSPORTER REQUEST FOR ALLOWABLE OPERATON AND PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator TEXACO Producing Inc. Address P. O. Box 728, Hobbs, New Mexico 88240 Other (Please explain) Reeson(s) for filing (Check proper box) Change of Operator from Getty to Change in Transporter of: New Well 12/31/84 TEXACO Producing Inc. Dry Gas 101 Recompletion Casingheod Gas Condensate Change in Ownership If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Lease No. Well No. | Pool Name, Including Formation Kind of Lease Lease Name B1327 State State, Federal or Fee 2 Mexico "G" Fowler Upper Yeso Location North 1980 2308 West F Feet From The I ine and Feet From Th Unit Letter Tea 24S37E County 16 NMPM Range Township Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Agaiess (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77001 The Permian Corp. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas P.O. Box 1492, El Paso, TX 79978 El Paso Natural Gas Co. wher. is gas actually connected? Sec. Rge. Twp. Unii If well produces cil or liquids, '37E 24s 16 F give location of tanks. PLC-11 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. **OIL CONSERVATION DIVISION** VI. CERTIFICATE OF COMPLIANCE 85 6/1 I hereby certify that the rules and regulations of the Oil Conservation Division have APPRO been complied with and that the information given is true and complete to the best of

W.B. hh

District Operations Manager (Tule)

April 12, 1985

my knowledge and belief.

(Date)

8Y DISTRICT I SUFERVISOP TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable 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 multiply completed wells.