

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES ORDERED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION 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

Operator

TEXACO Producing Inc.

Address

P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

- ☐ New Well  
☐ Recompletion  
☒ Change in Ownership

Change in Transporter of:

- ☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate

Other (Please explain)

Change of Operator from Getty to  
TEXACO Producing Inc. 12/31/84

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Cooper Jal Unit	151	Langlie Mattix 7-River Queen	State, Federal or Fee FEE	
Location				
Unit Letter A	170	Feet From The East	Line and 771	Feet From The North
Line of Section 24	Township 24S	Range 36E	NMPM	Lea County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Shell Pipeline Company	P.O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 1492, El Paso, TX 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
J 24 24S 36E	Yes 11/10/77

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.

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. L. L.

(Signature)

District Operations Manager

(Title)

April 11, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED June 1, 1985

BY *[Signature]*  
TITLE DISTRICT 1 SUPERVISOR

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 deviat-  
ions taken on the well in accordance with RULE 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.