STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.S.O.A.			
LAND OFFICE			
TRAMPPORTER	ÖL		
	GAS		
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

U.S.O.A.		11				JA						•
LAND OFFICE		 										<u> </u>
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I. DESCRIPT	NOT	OF	WE	LL AND LE	ASE					Kind of Lease		Lease No.
Lease Name					Well No.	Pool Name,					F•• Federa	
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Name of Autho	za r	11pe	3 T T	ne, Inc.	ead Gas F	or Dry	Gas 🔲	Address	(Give address	to myrcy abbione	s copy of this low	1 12 10 00 2011
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	(Signature)	
	Area Engineer	

	Area Engineer
-	(Title)
	5-31-85

(Dese)

tests taken on the well in accordance with MULE 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 weils.