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DISTRIBUTION	NEW MEVICO OIL	. CONSERVATION COMMISSI		XX-
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U.S.G.S.		AND RANSPORT OIL AND NAT		
TRANSPORTER OIL /				
GAS /	77.00	s come Trop. 00.	12.	
PRORATION OFFICE		- Marie a Bonto.	0 / 14.4	
Operator Operator	pr	a same a anop. co.		3 1468
Pan American Po	etroleum Corporation no	s Canada Prop. 60.		
501 Airport Dr	ive, Farmington, New Mex	ico 87401	(0)L U	ST. 3
Reason(s) for filing (Check proper be	Change in Transporter of:	Other (Please exp	plain)	
Recompletion	Oil Dry	Gas		
Change in Ownership	Casinghead Gas Cond	densate		
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND	D LEASE Well No. Fool Name, Including	Formation Kin	nd of Lease	Lease No
Mavajo Tribal "U"	4 Tocito Dome		te, Federal or Fee Fed	eral 14-20-60:
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21	36 W	10_#	San Juan	
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DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G			
	or Condensate	Address (Give address to wh	NICA ADDIOUSED CODY OF TA	is form is to be sent)
	Company	Boy 1599 Permin		00 97/01
Four Corners Pipeline Name of Authorized Transporter of C	Company Casinghead Gas 🛣 or Dry Gas 🦳	Box 1588, Farmis Address (Give address to wh	gton, New Mexi	co 87401 is form is to be sent)
	Casinghead Gas 🔏 or Dry Gas	Address (Give address to what Box 990, Farming	gton, New Mexitich approved copy of the ton, New Mexic	is form is to be sent)
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I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Area Engineer

May 31, 1968 (Date)

(Title)

JUN 3

By Original Signed by Emery C. Arnold

APPROVED_

SUPERVISOR DIST. #3

TITLE.

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 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.