DISTRIBUTION SANTA FE J	NEW MEXICO OIL	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
U.S.G.S. LAND OFFICE						
OPERATOR / PRORATION OFFICE						
Aztec Oil and (Gas					
Drawer 570, Fa. Reason(s) for filing (Check proper)	rmington, New Mexico	Other (Please	e explain)			
New Well Recompletion		Gas	, en plain,			
Change in Ownership give name		densate V Effect	ive March 1,	1967		
and address of previous owner_ DESCRIPTION OF WELL AN	D LEASE					
Lease Name	Well No. Pool Name, including		Kind of Lease State, Federal or F	Lease N		
Unit Letter B ;	910 Feet From The	Line and <u>1650</u>	Feet From The _	Ξ		
Line of Section 30	Township 201 Range	COF , NMPM	. San Ju	en Count		
DESIGNATION OF TRANSPO	DRIER OF CIL AND MATUDAL	<u>97,8</u>				
DESIGNATION OF TRANSPO Name of Authorized Transporter of The Permain Co- Name of Authorized Transporter of Southern Union	Off or Condensate more tion Casinghead Gas or Dry Gas	Rox 3119. Address (Give address t	Midland, To	opy of this form is to be sent)		
Name of Authorized Transporter of The Permain Cot Name of Authorized Transporter of Southern Union If well produces oil or liquids, give location of tanks.	Oil or Condensate moons ti on Casinghead Gas or Dry Gas Gas Unit Sec. Twp. Age.	Address (Give address to State address t	Midland, To o which approved co fic. Dallas.	opy of this form is to be sent)		
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above is true and complete to the best of my knowledge and belief.

The	a Sálmon	
/-	(Signature) District Superintendent	
	(Title) Manc's 1, 1967	· · · · · · · · · · · · · · · · · · ·

(Date)

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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 weights