40. DE COPIES RE	EIVED	1	
DISTRIBUTION			
SANTA FE		1-	
FILE	+-	<del> </del>	
U.S.G.S.			$\vdash$
LAND OFFICE			<del> </del>
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
	L1		

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  PROPERTY OF CONTROL OF CONTRO	SANTA FE		NEW MEXICO	CIL CONSERVATION COMMISSIO		
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS    AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS   AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	FILE		REQL	JEST FOR ALLOWABLE	rom C-104	
Reason Transport   Cold			1	AND	Effective 1-1-65	
TARRESPORTED   DEPTH   DESCRIPTION OF FACE   Properties   Companies in Properties   Depth   Description   Descri	LAND OFFICE		AOTHORIZATION TO	TRANSPORT OIL AND NATU	JRAL GAS	
Description of the superior give came  The superior street is a superior give came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came  The superior street is considered in the superior came in the superior came is superior came.  The superior street is considered in the superior came in the s	I TARSPORTER	<del></del>				
### AGGATYON OFFICE    Mobil Producing TX, & N.M. Inc.		<u>-                                     </u>				
Mobil Producting TX, & N.M. Inc.  White Greenway Plaza, Sufte 2700, Houston, Texas  White Greenway Plaza, Sufte 2700, Houston, Texas  Comparison Company Transported of Conformant Company Transported Company						
Mine Greenway Plaza, Suite 2700, Houston, Texas    Particle   Tring officer proper yeary					,	
Mine Greenway Plaza, Suite 2700, Houston, Texas    Particle   Tring officer proper yeary	Mobil Produci	na TX	e n m tha			
Contemporation   Change of Comments   Change in Transporate of:   Day One   As per N.M.O.C.D. order R-7495.					. —	
Contemporation   Change of Comments   Change in Transporate of:   Day One   As per N.M.O.C.D. order R-7495.	Nine Greenway	Plaza.	Suite 2700 Houston	<b>-</b>		
To change Pool name.   As per N.M.O.C.D. order R-7495.	Reason(s) for filing (Check	proper box)	orite 2700, Houston			
Other conversate Completed Cost   Dry Gas   As per N.M.O.C.D. order R-7495.  Heating of ownership pire same and edicates of previous owners of the previous owners of the previous owners of the previous owners of the previous owners owne	New Well		Change in Transporter of			
He change of conversibility in same and defects of previous waters are perfectly as the same and defects of previous waters and defects of previous waters are defects of previous waters.  II. DESCRIPTION OF FILL AND LEAST  Lindwith B Unit	· · · · · · · · · · · · · · · · · · ·			To change	ge Pool name	
H. Change of converting give above and service and decrease of previous annual of previous and of previous and or previous annual of previous and previous annual previous annual previous annual previous and previous annual previous annua	Change in Ownership		Control o	As per i	N.M.O.C.D. order P-7405	
Lindrith 8 Unit 8   Lindrith Gallup-Dakota, Meet   Sumer, Federal   176914   Levelue   M   940   Peet From The   SOUTH Line and   825   Peet From The   Meet   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   County   Line of Section   27   Township   24N   Rope   3N   NAME,   Rio Arriba   2N   Line of Section   27   Township   24N   Rope   24N   Rope   24N   Rope   24N   Rope   Line of Section   27   Township   24N   Rope   24N   Rope	If change of ownership given and address of previous of	re name Wner				
Ling of Section 27 Termship 240 Feet From The South Line and 825 Feet From The West Users Section 27 Termship 24N Runge 3W NAPIM. Rio Arriba Country Line of Section 27 Termship 24N Runge 3W NAPIM. Rio Arriba Country Countr	II. DESCRIPTION OF WEI	L AND L	EASE			
Lecture M 940 Feet Frant The South Line and 825 Feet Frant The West 078914 Line and 825 Feet Frant The West 124 Line and 8		4			Lease	
that Letter M 940 Feet From The South Line and 825 Feet From The WeSt  Line of Section 27 Tevrelship 24N Regular 3W NNPM Rio Arriba County  The SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Plateau Inc.  Plateau Inc.  Plateau Inc.  Plateau Inc.  Plateau Inc.  El Paso Natural Gas Co.  El Paso Natural Gas Co.  Line of Section 3 manufacture of Chandbead Gas (I) or Diry Gas Paso Natural Gas Co.  El Paso Natural Gas Co.  Line of Section 4 manufacture of Chandbead Gas (I) or Diry Gas Paso Natural Gas Co.  In section of manufacture of Chandbead Gas (I) or Diry Gas Paso Natural Gas Co.  Line of Section 4 manufacture of Chandbead Gas (I) or Diry Gas Villed Control of Section 1 manufacture of Chandbead Gas (I) or Diry Gas Paso Natural Gas Co.  Line of Section 4 manufacture of Chandbead Gas (I) or Diry Gas Villed Control of Section 1 manufacture of Section 1 ma	Focation	τ	1 8 Lindrith Gal	lup-Dakota, West Store, F		
Line of Section 27 Township 24N Rouse  3W NNEW RIO Arriba County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  National Authorised Presignates of City Company of Continuous Authorised Presignation Authorised Authorised Presignation Authorised Presignation Authorised Presignation Authorised Presignation Authorised Presignation Authorised Authorised Presignation Authorised Presignation Authorised Autho	Unit Letter M	940			7 Ederal   078914	
Line of Section 27 Township 24N Reads 3W NNPM RIO Arriba County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Plateau Inc.  Plateau	11	:	Feet From The South	Line and 825	From The West	
TUBING, CASING, AND CEMENTING RECORD  Performance  IT DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Nome of Authorists Transporter all City of Consequences of Plateau Inc.  School Authorists Transporter all City of Consequences of Plateau Inc.  School Authorists Transporter all City of Consequences of Plateau Inc.  School Authorists Transporter all Caudapters Gas (I) of Dry Gas Inc.  If Pass Natural Gas Co.  It will production is commissigned with that from any other jease or pool, give communique order number:  If this production is commissigned with that from any other jease or pool, give communique order number:  IV. COMPLETION DATA  Designate Type of Completion – (X)  One Specifies  Done Gampi Ready to Producting Formation  Top CU/Gas Pey  Taking Depth  Performance  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  Actival Prod. During Test  Taking Pressure  Actival Prod. During Test  Taking Pressure  Taking Pressure  Sale Free Completion of the design of the pass of the commission have been completed with and that the information given those and complete to the best of my knowledge and belief.  This form is to be filled in complicacy with much city and belief.  This form is to be filled in complicacy with much city and belief.  This form must be accompanied by a subdiction of the designation with much city and belief.  This form must be accompanied by a subdiction of the designation with much city and contents of the second completely that the nules and completes to the second completely the designation of	Line of Section 27	Towns	1AID 24N _	21.7		
Post Authorized Transporter of Colland Processing   Plateau   Inc.   Inc.   Plateau   Inc.   Inc.   Plateau   Inc.   Inc.   Inc.   Plateau   Inc.			Range	, NMPM, K	io Arriba	
Andrew (Over address to which approved copy of this form to be restal)  Andrew (Over address to which approved copy of this form to be restal)  Note of Address (Over address to which approved copy of this form to be restal)  P. O. BOX 108, F. Arminaton. MM 874001  El Paso Natural Gas Co.  P. O. Box 1492, F. Paron in to the restal)  It well productes to classified.  It well productes to commingful with that from any other lease or pool, give comminging order number.  It was production is commingful with that from any other lease or pool, give comminging order number.  It was production in commingful with that from any other lease or pool, give comminging order number.  It was production in commingful with that from any other lease or pool, give comminging order number.  It was production in commingful with that from any other lease or pool, give comminging order number.  It was production in commingful with that from any other lease or pool, give comminging order number.  It was production in commingful with that from any other lease or pool, give comminging order number.  It was production in commingful with that from any other lease or pool, give comminging order number.  Total Completion — (X)  Designate Type of Completion — (X)  Our Spandage  Designate Type of Completion — (X)  Designate Type of Completion — (X)  Our Completion — (X)  Designate Type of Completion — (X)  Total Completion — (X)  To	III. DESIGNATION OF TRA	NSPORTE	R OF OIL AND NATIONAL	GAS	County	
Elevations (DF, RRB, RT, CR, etc., Name of Producing Formation  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZ		ter of OII []	or Condensate	Andress (Give address to main		
If well produces all or litudes, eave learned or manufacture of ma				P. O Roy Too -	approved copy of this form is to be vent)	
If well produces all or litudes, eave learned or manufacture of ma	FI Paco National	ter of Casing	head Gas 🛴 or Dry Gas 🗔	*daress (Give address to which	nington, NM 87401	
If this production is commingled with that from any other Jesse or pool, give commingling order number:  IV. COMPLETION DATA  Designate Type of Completion — (X) Gas well Gas well New Well Workover Despen Flue Back Some Rest. Diff. Restr.  Date Soudsed Date Compl. Ready to Prod.  Elevations (DF, RAE, RT, CR, etc., Name of Producting Formation Top Oll/Gas Pay Tubing Depth Casing Shoe  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT  TUBING CASING, AND CEMENTING RECORD  HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT  OIL WELL.  Diet Plan New Oil Run To Tonks Date of Test Producting Method (Flow, pump, gas left, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Actual Pred, During Test  OIL CON.  GAS WELL  Actual Pred, During Test  I hereby certify that the rules and regulations of the Oil Conservation formation have been complied with and that the suffer-size given above is true and complete to the best of my knowledge and belief.  Authorized Agent  Authorized Agent  Garding Pressure (Ebst-Lin)  This form is to be flied in compliance with Rule 110a.  If this is a request for allowable for a newbright for sheepened and well his decordance with Rule 111a.  Fill out only Sections I. II. III. et all for charges of conditions of conditions are or substantian of the deviation are not now the accompanies of conditions.  Fill out only Sections II. III. et all for charges of conditions.				P. O. Box 1402 F1	spiroved copy of this form is to be sent)	
If this production is commingled with that from any other Jease or pool, give commingling order number:  1. COMPLETION DATA  Designate Type of Completion = (X)  Designate Typ	If well produces oil or liquids	U.	nut Sec. Twp. Rge.	is gas actually connected?	Paso, TX 79978	
Designate Type of Completion — (X)  Dies Spudded  Designate Type of Completion — (X)  Designate Type of Completion — (X)  Designate Spudded  Designate Completion — (X)  Desig	**************************************			1	I .	
Designate Type of Completion — (X)  Dies Spudded  Designate Type of Completion — (X)  Designate Type of Completion — (X)  Designate Spudded  Designate Completion — (X)  Desig	If this production is commin	gled with t	hat from any other lease or poo	). Five commingling and	<del></del>	
Designate type of Completion — (X)  Designate and type of Completion — (X)  Total Designate and type of Completion — (X)  Desi						
Does Spudded  Does Compi. Reday to Prod.  Elevations (DF, RRB, RT, GR, stc., Name of Producing Formation Top Cit/Gas Pay Tubing Depth Casing Stope  TUBING, CASING, AND CEMENTING RECORD  Depth SET SACKS CEMENT  TUBING, CASING, AND CEMENTING RECORD  DEPTH SET SACKS CEMENT  TUBING, CASING, AND CEMENTING RECORD  DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  Detection of Test Tubing Pressure  Length of Test Tubing Pressure  Casing Pressure (Fine, pump, gas lift, sft.)  Testing Method (pitch, Seck pr.)  Tubing Pressure (Fine-La)  Casing Pressure (Shet-La)  Country of Condensation  Commission have been compiled without the information given above is true and compiled to the best of my knowledge and belief.  All sections of this form must be filled out complicity for allowable for a newly drilled on despended well, this form must be filled out completely for allowable on new and recompileted with a recordance with study of the deviation facts taken on the well in accordance with study for charges of control.  All sections of this form must be filled out completely for allowable on new and recompileted worknews of the Medicine.  Fill but only Sections I, III, III, and Yor charges of control.  All sections of this form must be filled out completely for allowable for and recompileted with state of condition.  Fill but only Sections I, IIII, and Yor charges of control.  Fill but only Sections I, IIII, and Yor charges of control.  Fill but only Sections I, IIII, and Yor charges of control.	Designate Type of Co	mpletion -	- (X)	New Weil Workover Deeper	Plug Back Same Besty Diff Boots	
Elevetions (OF, RKE, RT, GR, etc., Name of Producing Formation  Top CUI/Gas Pay  Tubing Depth  Tubing Depth  Tubing Depth  Tubing CASING, AND CEMENTING RECORD  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WEIL  Date First New Oil Run To Tonas  Date of Test  Actual Prod. During Test  CII-Bbis.  Description of the Size  CASING Pressure  Tubing Pressure  Casing Pressure (Shut-ia)  Conmission have been compiled with end that the information given shows is true and complete to the Sest of my knowledge and belief.  Authorized Agent  (Title)  Authorized Agent  (Title)  Gispature;  Authorized Agent  (Date)  Fill out only Sections I. II. III, and Vy for charges of contains  Fill out only Sections I. II. III, and Vy for charges of contains  Fill out only Sections I. II. III, and Vy for charges of contains  Character of the section of the follow-  page 100-  Top CUI/Gas Pay  Tubing Record  Top Cui/Gas Pay  Tubing Description  Tubing Character  Sale of the Section Pay  Top Cui/Gas Pay  Tubing Description  Tubing Character  Sale of the Section Pay  Top Cui/Gas Pay  Tubing Description  Tubing Character  The Conservation  Conserva			<u></u>		July Mary	
TUBING, CASING, AND CEMENTING RECORD  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  Total mate to after recovery of strait volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 flows?  Deter First New Oil Run To Totals  Date of Test  Producing Memory Flow, pump, pas left, vitry  Length of Test  Tobing Pressure  Casing Pressure  Actual Prod. During Test  OIL CON.  Actual Prod. Test-MCF/D  Length of Test  Water: Sales  OIL CONSERVATION COMMISSION  Testing Method (puct, back pr.)  Tabling Pressure (Shitt-Lia)  Casing Pressure (Shitt-Lia)  Casing Pressure (Shitt-Lia)  Casing Pressure (Shitt-Lia)  OIL CONSERVATION COMMISSION  Approved to relievable for a newly delited or despended wells.  If this is a request for allowable for a newly delited or despended well.  If this is a request for allowable for a newly delited or despended well.  Fill out only Sections I. II. II. and excordance with august 1104.  All sections of this form must be filled out completely for allowable on new and recomplicated wells.  Fill out only Sections I. II. II. and excordance with august 1114.  All sections of this form must be filled out completely for allowable on new and recomplicated wells.  Fill out only Sections I. II. II. and evid for charge of counter, well names or numbers, or unamper, or maker, or unampers, or other such charge of counter.	•		To Compr. Neday to Prod.	Total Depth	P.B.T.D.	
TUBING, CASING, AND CEMENTING RECORD  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  Total mate to after recovery of strait volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 flows?  Deter First New Oil Run To Totals  Date of Test  Producing Memory Flow, pump, pas left, vitry  Length of Test  Tobing Pressure  Casing Pressure  Actual Prod. During Test  OIL CON.  Actual Prod. Test-MCF/D  Length of Test  Water: Sales  OIL CONSERVATION COMMISSION  Testing Method (puct, back pr.)  Tabling Pressure (Shitt-Lia)  Casing Pressure (Shitt-Lia)  Casing Pressure (Shitt-Lia)  Casing Pressure (Shitt-Lia)  OIL CONSERVATION COMMISSION  Approved to relievable for a newly delited or despended wells.  If this is a request for allowable for a newly delited or despended well.  If this is a request for allowable for a newly delited or despended well.  Fill out only Sections I. II. II. and excordance with august 1104.  All sections of this form must be filled out completely for allowable on new and recomplicated wells.  Fill out only Sections I. II. II. and excordance with august 1114.  All sections of this form must be filled out completely for allowable on new and recomplicated wells.  Fill out only Sections I. II. II. and evid for charge of counter, well names or numbers, or unamper, or maker, or unampers, or other such charge of counter.	Elevations (DF, RKB, RT, GR	etc., Na	me of Producing Formation			
TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  The sale for this depth or be for full by toward  Date First New Oil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas Min, eEr.)  Length of Test  Actual Prod. During Test  Casing Pressure  (Conservation  Casing Pressure (Short-in)  Testing Method (pure, beck pr.)  Tubing Pressure (Short-in)  Testing Method (pure, beck pr.)  Tubing Pressure (Short-in)  Casing Pressure (Short-in)  Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Authorized Agent  (Giralier)  All sections of this form must be filled out completely for allowable for a newly drilled or deepened with this is a request for allowable for a newly drilled or deepened with this is a request for allowable for a newly drilled or deepened with this is a request for allowable for a newly drilled or deepened with this is a request for allowable for a newly drilled or deepened with this is requested with.  Fill out only Sections 1, II, II, and VI for changes of compliance with and belief or number, or transports, or other such changes of conditions.  Fill out only Sections 1, III, and VI for changes of conditions well as the changes of conditions.				1 op Ott/Gas Pay	Tubing Depth	
TUBING, CASING, AND CEMENTING RECORD  MOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  JOHN SET  SACKS CEMENT  OF THE SET  SACKS CEMENT  SACKS CEME	Perforations					
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  Date First New Oil Run To Tanks Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  C					Depth Casing Shoe	
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  Date First New Oil Run To Tanks Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  C			TUBING, CASING, AN	O CEMENTING RECORD		
V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WEIL  Date First New Cil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, eff.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Actual Prod. During Test  Casing Pressure  Testing Method (puot, back pr.)  Tubing Pressure (Shint-is)  Casing Pressure (Shint-is)  Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  (Signature)  Authorized Agent  (Casing Pressure (Shint-is)  City of Conservation  City of the first is to be filled in compliance with mult at 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 test taken on the well in accordance with multa 1104.  (Casing Pressure (Shint-is)  APPROVED  This form is to be filled in compliance with multa 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 test taken on the well in accordance with multa 1104.  (Casing Pressure (Shint-is)  APPROVED  This form is to be filled in compliance with multa 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 new and recompliance with multa 1104.  All sections of this form must be filled out completely for allowable on new and recompliance with multa 1104.  Fill but not constant the fill do ut completely for allowable for one we and recompanied with and the must be accompanied with multa 1104.  Fill but not constant the multa 1104.  All sections of this form must be filled out completely for allowable for one we and recompanied with and the multa 1104.  The producing method (Flow pump, gas life, fill)  Actual Prod. The fill of the section of the deviation of the deviati	HOLE SIZE		CASING & TUBING SIZE			
Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Display Size  Actual Prod. During Test  Actual Prod. During Test  Display Size  Casing Pressure  Casing				32 1 1132	SACKS CEMENT	
Date First New Oil Run To Tanks  Date of Test  Date of Tes	<del></del>					
Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Display Size  Actual Prod. During Test  Actual Prod. During Test  Display Size  Casing Pressure  Casing						
Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Display Size  Actual Prod. During Test  Actual Prod. During Test  Display Size  Casing Pressure  Casing	V Trempara and					
Date of Test    Producing Method (Flow, pump, gas Mil. eff.)	OH WELL	ST FOR A	LLOWABLE (Test must be i	after recovery of total volume of land		
Length of Test  Tubing Pressure  Casing	Date First New Oil Run To Tan	ka Date	able for this d			
Actual Prod. During Test  Cil-Bbis.  Casing Pressure  Casing Pressure  Coll CON.  Condensate Marker State  OIL CON.  Consequence Condensate  Condensate  Condensate  Condensate  Condensate  Condensate  Condensate  Condensat				Producing Method (Flow, pump, gas	hiji, att.)	
Actual Prod. During Teet  GAS WELL  Actual Prod. Teet—MCF/D  Length of Teet  DIL CON.  Belie. Condenacte/MANGF  Grevity of Condenacte  Consing Pressure (Shut-in)  Cosing Pressure (Shut-in)  Cosing Pressure (Shut-in)  Conservation  Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Authorized Agent  (Title)  6-7-84  (Date)  Wetter 1984  Grevity of Condenacte  Condenacte/MANGF  Cosing Pressure (Shut-in)  Cosing Pressure (Shut-in)  Condenacte/MANGF  Covity of Condenacte  Condenacte/MANGF  Covity of Covity of Covity of Covity of Covity o	Length of Test	Tub	ing Pressure		1 1 1	
GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condenacts/AMCF  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choice Size  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Authorized Agent  (Title)  Gignature)  All sections of 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 well name or number, or transporter, or other such change of condition well name or number, or transporter, or other such change of condition			•	Casing Pressure	Chesh Size	
GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bile. Condensate/MMCF  Grevity of Condensate  Chaing Pressure (Shut-is)  Chaing Pressure (Shut-is)  Choke Size  OIL CONSERVATION COMMISSION  I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Authorized Agent  (Title)  Authorized Agent  (Title)  All sections of this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1112.  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 well name or number, or transporter, or other such change of condition	Actual Prod. During Teet	Cii-	Bbis.	Water - Hilliam		
Actual Prod. Test-MCF/D  Length of Test  Testing Method (pirot, back pr.)  Tubing Pressure (Shut-is)  Casing Pressure (Shut-is)  Choke Size  OIL CONSERVATION COMMISSION  Approved  Approved  Approved  Approved  Approved  Title  Supervisor petrict # 3  This form is to be filed in compliance with RULE 1104.  If this is a request for ellowable 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. and VI for changes of owner, well name or number, or transporter, or other such change of condition well name or number, or transporter, or other such change of condition				JUN 1 4 1900	Gas - MCF	
Actual Prod. Test-MCF/D  Length of Test  Testing Method (pirot, back pr.)  Tubing Pressure (Shut-is)  Casing Pressure (Shut-is)  Choke Size  OIL CONSERVATION COMMISSION  Approved  Approved  Approved  Approved  Approved  Title  Supervisor petrict # 3  This form is to be filed in compliance with RULE 1104.  If this is a request for ellowable 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. and VI for changes of owner, well name or number, or transporter, or other such change of condition well name or number, or transporter, or other such change of condition	844			- CONT	) <del>\\</del>	
Testing Method (putot, back pr.)  Tubing Pressure (Shut-is)  Casing Pressure (Shut-is)  Choke Size  VI. CERTIFICATE OF COMPLIANCE  OIL CONSERVATION COMMISSION  Approved  Approved  Approved  Title  Supervisor Detrict # 3  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 condition well name or number, or transporter, or other such changes of condition	GAS WELL			OIL COIN.		
Testing Method (puot, back pr.)  Tubing Pressure (Shut-is)  Casing Pressure (Shut-is)  Choke Size  OIL CONSERVATION COMMISSION  APPROVED  APPROVED  Thereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Supervisor Detrict # 3  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 fulled 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	Actual Prod. Test-MCF/D	Leng	th of Test	Bhis. Condensate/MMCF	Commercial	
VI. CERTIFICATE OF COMPLIANCE  OIL CONSERVATION COMMISSION  APPROVED  OIL CONSERVATION COMMISSION  TITLE  SUPERVISOR DETRICT # 3  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	Teating Mathed (average to 1				Cravity of Contensate	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.    Authorized Agent	method (pitot, eack pr.)	Tubir	og Pressure (Shut-in)	Casing Pressure (Shut-in)	Chara Sies	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.    Authorized Agent	VI CERTIFICATION					
APPROVED  Commission have been compiled with end that the information given above is true and complete to the best of my knowledge and belief.  Commission have been compiled with end that the information given above is true and complete to the best of my knowledge and belief.  Commission have been compiled with end that the information given above is true and complete to the best of my knowledge and belief.  TITLE  SUPERVISOR DETRICT # 3  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 condition, well name or number, or transporter, or other such change of condition.	CERTIFICATE OF COMPL	IANCE		OIL CONSERV	ATION COMMISSION	
Authorized Agent  (Title)  (Date)  Authorized Signature)  (Date)  Authorized Agent  (Date)  (Date)  Authorized Agent  (Date)  (Date)  Authorized Agent  (Date)  (Date)  Authorized Agent  (Date)  Author	! hearby as us				. 0. 4	
TITLE  SUPERVISOR DETRICT # 3  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.	Commission have been compli	and regulat	ions of the Oil Conservation	APPROVED JUN 1984		
TITLE  SUPERVISOR DETRICT # 3  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.	above is true and complete to	the best	of my knowledge and belief	Drank ! Save		
This form is to be filed in compliance with RULE 1104.  (Signature)  Authorized Agent  (Title)  6-7-84  (Date)  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.					- way	
This form is to be filed in compliance with RULE 1104.  (Signature)  Authorized Agent  (Title)  6-7-84  (Date)  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.	, 0 , 2		•	TITLE	SUPERVISOR DISTRICT # 3	
(Signature)  Authorized Agent  (Title)  6-7-84  (Date)  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.	Want of A	) ( <u>"</u> 1	Mina			
Authorized Agent  (Title)  6-7-84  (Date)  All sections of 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.	- unit	<u>-                                    </u>	WUIU	If this is a request for allow	wahla fan a mandu datta da a 'a	
(Title)  6-7-84  (Date)  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.	Authon	izad A~	ont			
6-7-84 sble 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.	7.10 (1)01	(Title)	<u> </u>	rests taxed of the mett TV SCCO	rdance with RULE 111.	
(Date)  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.	6-7		I	ante on new and tecombieted Me	ella.	
if were name of number, or transporter, or other such thange of condition.			<del></del>	Fill out only Sections I. II	I III and VI for changes of success	
ti bannata banna 17 104			ii ii	watt name or number, or transport	er, or other such change of condition	

