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| NO. OF COPIES RECEIVED | | | |
| DISTRIBUTION | | CONSERVATION COMMISSION | Form C-104 |
| SANTA FE | REQUEST | FOR ALLOWABLE | Supersedes Old C-104 and C-1. Effective 1-1-65 |
| FILE | | 71110 | Effective 1-1-65 |
| U.S.G.S. | AUTHORIZATION TO TRA | ANSPORT OIL AND NATURAL | GAS |
| LAND OFFICE | | COT A TABLE !! | ខុត |
| IRANSPORTER | | man, | |
| GAS | | | |
| OPERATOR | | | |
| PRORATION OFFICE | | | |
| Operator | | | |
| Western Drilli | ing Company | | |
| Address | | | |
| Box 1392, Long | gview, Texas | | |
| Reason(s) for filing (Check proper t | box) | Other (Please explain) | |
| Lew Well | Change in Transporter of: | | |
| Recompletion | Cil Dry G | as XX | |
| Change it. Ownership | Casinghead Gas Conde | ensate | |
| | | | |
| If change of ownership give name and address of previous owner | 2 | | |
| DESCRIPTION OF WELL AN | D LEASE | | Kind of Lease |
| Lease Name | | ame, Including Formation | State, Federal or Fee Federal |
| Great Western Federa | al I Saw | yer San Andres | rederal |
| Location | 440 | | -111 |
| Unit Letter ; | 660 Feet From The S Li | ne and 660 Feet From | The |
| | | | County |
| Line of Section 28 , | Township 9S Range | 38E , NMPM, Lea | County |
| | on our and MARKINAL CO | A.C. | |
| DESIGNATION OF TRANSPO | ORTER OF OIL AND NATURAL G | AS Address (Give address to which appro | oved copy of this form is to be sent) |
| Name of Authorized Transporter of | CII GI Condensate; | | |
| McWood Corporation | Control on Can Can Can Can Can Can Can Can Can Ca | Address (Give address to which appro | (as |
| Name of Authorized Transporter of | | | |
| Cities Service Oil | | Bartlesville, Oklahom | na 74003 |
| | | Is an actually connected? W | nen |
| If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? | nen |
| give location of tanks. | M 28 9S 38E | Yes (S | nen 9/1/66 |
| give location of tanks. | Contract of the Contract of th | Yes (S | nen |
| give location of tanks. | M 28 9S 38E with that from any other lease or pool | Yes , give commingling order number: | 9/1/66 |
| give location of tanks. If this production is commingled. COMPLETION DATA | M 28 9S 38E with that from any other lease or pool | Yes (S | 9/1/66 |
| give location of tanks. If this production is commingled. COMPLETION DATA Designate Type of Complete | M 28 9S 38E with that from any other lease or pool etion $-(X)$ Gas Well | Yes , give commingling order number: New Well Workover Deepen | 9/1/66 |
| give location of tanks. If this production is commingled. COMPLETION DATA | M 28 9S 38E with that from any other lease or pool | Yes , give commingling order number: | Plug Back Same Restv. Diff. Restv |
| give location of tanks. If this production is commingled. COMPLETION DATA Designate Type of Complete | M 28 9S 38E with that from any other lease or pool etion — (X) Date Compl. Ready to Prod. | Yes , give commingling order number: New Well Workover Deepen Total Depth | Plug Back Same Res'v. Diff. Res'v |
| give location of tanks. If this production is commingled. COMPLETION DATA Designate Type of Complete | M 28 9S 38E with that from any other lease or pool etion $-(X)$ Gas Well | Yes , give commingling order number: New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v |
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(Title)

(Date)

J. R. Du Partner

/R. Dunaway

September 30, 1966

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.

able on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.