NO. OF SCRIES RECEIVED DISTRIBUTION SANTA FE FILE	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C- Effective 1-1-35
U.S.G.S. LAND OFFICE I RANSPORTER GAS OPERATOR PRORATION OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (GAS
H. L. Brown	, Jr. & W. J. Heath		
704 Vaughn Reason(s) for filing (Check proper t	Building, Midland, Te	Cher (Please explain)	
New Well Berong Atton	Change in Transporter of: Oil Dry Go Casinghead Gas Conde	is:	
f change of ownership give name nd address of previous owner			
DESCRIPTION OF WELL AN Leanse little M. P. C. State	Well No. Pool No	me, Including Formation h Bagley Upper Penn	Kind of Lease State, Federal or Fee State
Loration H 6	60 Feet From The East Li	ne and 1980 Feet From	The North
1111 _0.00		2 134	1.00
Line of Section 27 ,	Township 11 - Store Hange)—ISBS , NMFM,	County
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA	Address (Give address to which appro	wed copy of this form is to be sent)
DESIGNATION OF TRANSPO Home of Authorized Transporter of The Permian Corp	Oll 🏝 💮 or Condensate 🗌	Address (Give address to which appro Box 3119, Midland,	
Name of Authorized Transporter of	or Condensate or Condensate	Address (Give address to which appro	Texas
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Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Tubing Pressure

1965

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.

(Title)

(Date)

June 24,

Choke Size

Casing Pressure

OIL CONSERVATION COMMISSION APPROVED

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 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 nleted wells.