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| AUG 11 1986  |   |   |   |   |
| STATE OF NEW MEXICO  |   |   |   |   |
| NERGY AND MINERALS DEPARTMENT O. C. D. ARTESIA, OFFICE   |   |   |   | m C-104<br>Ised 10-01-78  |
| DISTRIBUTION OIL CONSERVA  | TION DIV  | ISION   | For<br>Pag  | mat 06-01-83<br>je 1  |
| ланта ге / Р. О. ВО  |   |   |   |   |
| SANTA FE, NEW  | MEXICO 8  | /501  |   |   |
|  | R ALLOWABLE   |   |   |   |
| AI A   |   | NATURAL GAS   |   |   |
|  |   |   |   |   |
| J. CLEO THOMPSON   |   |   |   |   |
| Address  |   |   |   |   |
| 4500 REPUBLIC BANK TOWER   | Ölher   | (Please explain)  | <u></u>   | <u> </u>  |
| New Well Change in Transporter of:   |   |   | e name only :   | from  |
|  | ondensate   | rge Etz 🎾   | 6   |   |
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| f change of ownership give name<br>nd address of previous owner  |   |   | <u></u>   | <u></u>   |
|  |   |   |   |   |
| L DESCRIPTION OF WELL AND LEASE  |   |   |   |   |
| Lease Name Well No. Pool Name, Including F   |   | Kind of L   |   | ral LC-0639   |
| Ledge Name<br>SLUTract 6<br>6 Square Lake Gray   |   |   | .•ase<br>deral or Fee Fede:   |   |
| Lease Name Well No. Pool Name, Including F<br>SLUTract 6 6 Square Lake Gray<br>Location N 1.980 West   | burg San An   | idres <sup>State</sup> , Fe   |   |   |
| Address     Weil No.     Pool Name, Including F       SLUTract 6     6     Square Lake Gray  | burg San An<br>ne and 660   | idres State, Fe   | deral or Fee Fede:  | ral IC-0639   |
| Lease Name     Well No.     Pool Name, Including F       SLUTract 6     6     Square Lake Gray       Location     1,980     Feet From The West   | burg San An   | idres <sup>State</sup> , Fe   | deral or Fee Fede:  |   |
| Leese Name       Weil No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Unit Letter       N         Line of Section       35         Township       16         Range       3         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL   | burg San An<br>ne and 660<br>30   | Idres State, Fe   | deral or Fee Fede:  | Eddy Count  |
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| Lease Name       Well No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Unit Letter       N         Line of Section       35         Township       16         Range       3         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OIL       or Condensate         Navajo Refinery Company         Name of Authorized Transporter of Casinghead Gas () or Dry Gas  | burg San An<br>ne and 660<br>30<br>L GAS<br>Address (Give a<br>P.O. Box<br>Address (Give a  | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>Iddress to which a<br>159, Artes<br>iddress to which a   | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this  | Eddy <sub>Count</sub>   |
| evase Name       Weil No. Pool Name, Including F         6LUTract 6       6 Square Lake Gray         ocation       1,980         Unit Letter       N         Line of Section       35         Township       16         HL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OIL I I I or Condensate         Navajo Refinery Company         Name of Authorized Transporter of Casinghead Gas I or Dry Gas         Phillips 66 Natural Gas Company   | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>P.O. Box<br>Address (Give a<br>Bartlesvi  | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>Iddress to which a<br>159, Artes<br>Iddress to which a   | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this  | Eddy <sub>Count</sub>   |
| weil No.       Pool Name, Including F         SLUTract 6       6       Square Lake Gray         Jocation       1,980       Feet From The West Line         Unit Letter       N       1,980       Feet From The West Line         Line of Section       35       Township       16       Range       3         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OII       or Condensate       Navajo Refinery Company         Name of Authorized Transporter of Casinghead Gas (S)       or Dry Gas       Phillips         Phillips       66       Natural Gas Company       Transporter   | burg San An<br>ne and 660<br>30<br>L GAS<br>Address (Give a<br>P.O. Box<br>Address (Give a  | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>Iddress to which a<br>159, Artes<br>Iddress to which a   | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this<br>oma 74004   | Eddy <sub>Count</sub>   |
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| Lesse Name       Well No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       N       1,980         Unit Letter       N       1,980         Feet From The West       Lin         Line of Section       35       Township         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OIL       ar Condensate         Navajo Refinery Company         Name of Authorized Transporter of Casinghead Gae (x)       or Dry Gae         Phillips 66 Natural Gas Company         If well produces oil or liquids,       Unit         give location of tanks.       X         I this production is commingled with that from any other lease or pool,         NOTE:       Complete Parts IV and V on reverse side if necessary.   | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>Bartlesvi<br>is gas actually<br>y:22<br>give comminglin   | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>Iddress to which a<br>159, Artes:<br>Iddress to which a<br>ille, Oklaho<br>connected?  | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this<br>oma 74004<br>When<br>- 28   | Eddy count<br>Eddy count<br>form is to be sent)<br>form is to be sent)<br>- 60<br>Posted ID-3<br>8-22-84  |
| Lease Name       Well No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Unit Letter       N         1,980       Feet From The West         Line of Section       35         Township       16         Range       3         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OII       or Condensate         Navajo       Refinery Company         Name of Authorized Transporter of Casinghead Gas (R)       or Dry Gas         Phillips       66 Natural Gas Company         If well produces oil or liquids,       Unit         give location of tanks.       X         I this production is commingled with that from any other lease or pool,         NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE   | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>P.O. Box<br>Address (Give a<br>Bartlesvi<br>is gas actually<br>y.a2<br>give comminglin  | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>ddress to which a<br>159, Artes:<br>iddress to which a<br>ille, Oklahe<br>connected?<br>OIL CONSER   | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this<br>oma 74004<br>When<br>- 28   | Eddy count<br>Form is to be sent)<br>form is to be sent)<br>form is to be sent)<br>Forsted ID-3<br>8-22-86  |
| Weil No.       Pool Name, Including F         SLUTract 6       6       Square Lake Gray         Location       N       1,980       Feet From The West Line         Unit Letter       N       1,980       Feet From The West Line         Line of Section       35       Township       16       Range       3         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of Oil I I or Condensate       Or Ory Gas       Phillips         Name of Authorized Transporter of Casinghead Gas I or Dry Gas       Or Dry Gas       Phillips         Name of Authorized Transporter of Casinghead Gas I or Dry Gas       Phillips       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         I well production is commingled with that from any other   | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>Bartlesvi<br>Is gas actually<br>give commingling<br>APPROVED  | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>Address to which a<br>159, Artes:<br>iddress to which a<br>i11e, Oklaha<br>connected?<br>OIL CONSER<br>AUG 2   | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this<br>oma 74004<br>When<br><u>7-28</u><br>VATION DIVISIO<br>2 1986  | Eddy count<br>Form is to be sent)<br>form is to be sent)<br>form is to be sent)<br>Forsted ID-3<br>8-22-84  |
| Lease Name       Well No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Unit Letter       N         1,980       Feet From The West         Line of Section       35         Township       16         HL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of Oili S       or Condensate         Name of Authorized Transporter of Casinghead Gas S       or Dry Gas         Phillips 66 Natural Gas Company         Name of authorized Transporter of Casinghead Gas S       or Dry Gas         Phillips 66 Natural Gas Company         If well produces oil or liquids,       Unit         give location of tanks.       Sec.         Twp:       Rgs.         If this production is commingled with that from any other lease or pool,         NOTE:       Complete Parts IV and V on reverse side if necessary.         AI. CERTIFICATE OF COMPLIANCE         hereby certify that the rules and tegulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of  | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>Bartlesvi<br>Is gas actually<br>give commingling<br>APPROVED  | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>ddress to which a<br>159, Artes:<br>iddress to which a<br>ille, Oklahe<br>connected?<br>OIL CONSER   | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this<br>oma 74004<br>When<br><u>7-28</u><br>VATION DIVISIO<br>2 1986<br>By  | Eddy count<br>Eddy count<br>form is to be sent)<br>form is to be sent)<br>- 60<br>Posted ID-3<br>8-22-84  |
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| Lease Name       well No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Unit Letter       N       1,980         Feet From The       West         Line of Section       35         Township       16         Range       3         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of Oil       or Condensate         Navajo Refinery Company         Name of Authorized Transporter of Casinghead Gae (2)       or Dry Gae         Phillips 66 Natural Gas Company         If well produces oil or liquids.       Unit         give location of tanks.       Unit         I well produces oil or liquids.       Unit         Mare of complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE         hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  | burg San An<br>ne and 660<br>30<br>L GAS<br>Address (Give a<br>P.O. Box<br>Address (Give a<br>Bartlesvi<br>Is gas actually<br>y:02<br>give commingli<br>BY<br>TITLE<br>This for<br>If this I<br>well, this for                                      | Idres State, Fe<br>Feet Fr<br>, NMPM,<br>Address to which a<br>159, Artes:<br>Iddress to which a<br>159, Artes:<br>Iddress to which a<br>11e, Oklaha<br>connected?<br>OIL CONSER<br>AUG 2<br>Original Signed<br>Les A. Clomen<br>Supervisor Districtions<br>m is to be filed<br>m must be ecco  | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>i.a., NM 88210<br>pproved copy of this<br>oma 74004<br>When<br><u>7-28</u><br>VATION DIVISIO<br>9 1986<br>By<br>ts<br>ct II<br>in compliance with<br>allowable for a new<br>impanied by a tabu  | Eddy count<br>Eddy count<br>form is to be sent)<br>form is to be sent)<br>form is to be sent)<br>Footed ID-3<br>E-20-EL<br>ON c by well runs<br>, 19<br>th mULE 1104.<br>(by drilled or deependent) |
| Leese Name       Weil No. Pool Name, Including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Unit Letter       N         1,980       Feet From The West         Line of Section       35         Township       16         Range       3         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OIL S       or Condensate         Name of Authorized Transporter of OIL S       or Dry Gas         Phillips 66 Natural Gas Company       Phillips 66 Natural Gas Company         If well produces oil or liquids, give location of tanks.       Unit         Sec.       Twp.         Rge.       K         If this production is commingled with that from any other lease or pool,         NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE         I hereby certify that the rules and tegulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of  | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>P.O. BOX<br>Address (Give a<br>Bartlesvi<br>is gas actually<br>y.a2<br>give comminglis<br>APPROVED<br>BY<br>TITLE<br>This for<br>If this I<br>well, this to<br>tests taken    | Adress State, Fe<br>Feet Fr<br>, NMPM,<br>Address to which a<br>159, Artes:<br>Address to which a<br>159, Artes:<br>Address to which a<br>111e, Oklaha<br>connected?<br>OIL CONSER<br>AUG 2<br>Original Signed<br>Les A. Clemen<br>Supervisor District<br>rm is to be filed<br>s a request for<br>a seco<br>on the well in a  | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>i.a., NM 88210<br>pproved copy of this<br>oma 74004<br>When<br><u>7-28</u><br>VATION DIVISIO<br>2 1986<br>By<br>ts<br>ct.l.l.<br>in compliance with<br>phone of the new<br>proved copy of this<br>oma 74004<br>When<br><u>7-28</u><br>NATION DIVISIO<br>2 1986<br>By<br>ts<br>ct.l.l.<br>in compliance with<br>phone of the new<br>phone of t | Eddy Count<br>Eddy Count<br>form is to be sent)<br>form is to be sent)<br>- 60<br>Posted ID-3<br>E-30-Et<br>ON Chy. well new<br>  |
| SLUTract 6       6       Square Lake Gray         Location       N       1,980       Feet From The West       Line         Unit Letter       N       ; 1,980       Feet From The West       Line         Line of Section       35       Township       16       Range       3         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of OIL       or Condensate       Navajo       Natural       or Dry Gas       Phillips       66       Natural       Gas       Company         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Phillips       Ref.       30         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Phillips       Ref.       30         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Phillips       Ref.       30         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Phillips       Ref.       30         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If well produces oil or liquids.       Unit       Sec.       Twp.       Ref.         If this production is commingled with that from any other lease or pool.       NOTE:       Complete Parts IV and V on reverse side if nece  | burg San An<br>ne and 660<br>30<br>L GAS<br>Address (Give a<br>Bartlesvi<br>Is gas actually<br>y:02<br>give commingli<br>APPROVED<br>BY<br>TITLE<br>This for<br>If this I<br>well, this for<br>tests taken<br>All sect<br>sble on new               | Idres State, Feet Fr<br>, NMPM,<br>Address to which a<br>159, Artes:<br>iddress to which a<br>159, Artes:<br>iddress to which a<br>11e, Oklaha<br>connected?<br>OIL CONSER<br>AUG 2<br>Original Signed<br>Les A. Clomen<br>Supervisor District<br>rm is to be filed<br>s a request for<br>and recomplete  | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>i.a., NM 88210<br>pproved copy of this<br>oma 74004<br>When<br><u>7-28</u><br>VATION DIVISIO<br>2 1986<br>By<br>ts<br>ct II<br>in compliance with<br>a must be filled out<br>d wells.   | Eddy count<br>Eddy count<br>form is to be sent)<br>form is to be sent)<br>form is to be sent)<br>- 60<br>Posted ID-3<br>E-30-Et<br>ON chy. well new<br>   |
| Lease Name       Weil No. Pool Name, including F         SLUTract 6       6 Square Lake Gray         Location       1,980         Feet From The West       Line of Section         1,980       Feet From The West         Line of Section       35         Township       16         Range       3         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL         Name of Authorized Transporter of Oil S       or Condensate         Name of Authorized Transporter of Casinghead Gas       or Dry Gas         Phillips 66 Natural Gas Company         Name of Authorized Transporter of Casinghead Gas       or Dry Gas         Phillips 66 Natural Gas Company         If well produces oil or liquids.       Unit       Sec.         If well produce oil or liquids.       Unit       Sec.       Twp.         Ref.       20       16       20         If this production is commingled with that from any other lease or pool.       NOTE: Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       I       Signeture)       Magenture)         AGENT       AGENT       AGENT   | burg San An<br>ne and <u>660</u><br>30<br>L GAS<br>Address (Give a<br>Bartlesvi<br>is gas actually<br>y.a2<br>give comminglin<br>APPROVEC<br>BY<br>TITLE<br>TITLE<br>Title for<br>If this for<br>tests taken<br>All sect<br>able on new<br>Fill out | Adress State, Feet Fr<br>, NMPM,<br>Address to which a<br>159, Artes:<br>Address to which a<br>159, Artes:<br>Address to which a<br>11e, Oklaha<br>connected?<br>OIL CONSER<br>AUG 2<br>Original Signed<br>Les A. Cloment<br>Supervisor District<br>rm is to be filed<br>a request for a<br>on the well in a<br>clone of this form<br>and recompleted<br>to only Sections | deral or Fee Fede:<br>rom The <u>South</u><br>pproved copy of this<br>ia, NM 88210<br>pproved copy of this<br>oma 74004<br>When<br><u>VATION DIVISIO</u><br>2 1986<br>By<br>ts<br>ctill<br>in compliance with<br>soliowable for a new<br>incoordance with Ru<br>a must be filled out<br>d wells.<br>1. II. III. end VI  | Eddy Count<br>Eddy Count<br>form is to be sent)<br>form is to be sent)<br>- 60<br>Posted ID-3<br>E-30-Et<br>ON Chy. well new<br>  |

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