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DISTRIBUTION	OIL CONSERVATION DIVISION					ormet 06-01-83 sga 1	
	P. O. BOX 2088 SANTA FE, NEW MEXICO 87501						
	SANIA FE, NEW	MEXIC	0 87501				
ANSPORTER OIL VI							
	REQUEST FOR ALLOWABLE						
DRATION OFFICE	AUTHORIZATION TO TRANSP	ORT OIL	AND NATUR	AL GAS			
TEXACO Producing Inc.		<u> </u>				<u>.</u>	
P.O. Box 728, Hobbs, Ner	w Mexico 88240						
reson(s) for filing (Check proper box)			Other (Please e Change O	f Opera	tor from G	etty to	
J New Well	Change in Transporter of:	Gas	TEXACO P			2/31/84	
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	5-USGS-ARTESIA 1-R. J. STARRAK-TULSA		CARY-MIDLAND Form Approved. Budget Bureau No. 42-R1424
	UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY		LEASE LC-029418 (b) IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDR	Y NOTICES AND REPORTS ON WELL s form for proposals to drill or to deepen or plug back to a di orm 9-331-C for such proposals.)	LO	UNIT AGREEMENT NAME
1. oil well X 2. NAME O Getty 3. ADDRES	gas vell other F OPERATOR Oil Company S OF OPERATOR	9.	Skelly Unit WELL NO. 110 FIELD OR WILDCAT NAME Grayburg Jackson . SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATIC below.) AT SURI	BOX 730, Hobbs, N1 88240 ON OF WELL (REPORT LOCATION CLEARLY. See spa FACE: Unit Letter G 1980' FNL & 1980	ice 17	AREA Sec. 14-17S-31E COUNTY OR PARISH 13. STATE Eddy New Mexico
AT TOTA	PROD. INTERVAL: AL DEPTH: APPROPRIATE BOX TO INDICATE NATURE OF NO , OR OTHER DATA	OTICE,	API NO.
TEST WATEL FRACTURE SHOOT OR REPAIR WE PULL OR A MULTIPLE CHANGE ZO ABANDON*	ACIDIZE		(NOTE: Report results of multiple 2017/01/07/9r zone change on Form 94000 2017/01/07/9r zone U.S. HLULUUIUAL SURVEY ARTESIA, NEW MEXICO
	IBE PROPOSED OR COMPLETED OPERATIONS (Clearing estimated date of starting any proposed work. If red and true vertical depths for all markers and zones		
Rise	r on <u>8 5/8" OD</u> and <u>5 1/2" OD</u> casi	ng broug	ght to surface. RECEIVE
_	ected by B. W. Weaver (NNOCC) on wected by Mike Williams (NNOCC) on		MAY 2 1979
	ected by James Brasfield (USGS) on ected by Bird Jones (USGS) on	1	2 5 1979
	e Safety Valve: Manu. and Type		Set @ Ft.
18. I here	by certify that the foregoing is true and correct	a Supt.	DATE APR 2 5 1973
APPROVED CONDITION	BY JUCCE Leille TILE	or State office	EINEERATE

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*See Instructions on Reverse Side