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Submit 5 Copies Appropriate District Office DISTRICT 1	J	Energy, N			ew Mexico ural Resourc	es Departm	ent		C 1	1-1-89
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	(	OIL C	ONS		TION D	IVISIO			at Botto	ructions in of Page
P.O. Drawer DD, Artesia, NM 88210		Sa	nta Fe.		ox 2088 exico 8750	4-2088		uning () ang €t <mark>i</mark> teg		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 -	REQU	JEST FO		LOWAE	BLE AND A	AUTHORI	ZATION	in 1.17	s i c F	
I. Operator			<u>INSPC</u>		AND NAT	I UHAL GA	45 Well	API No.	· · ·	
SOCORRO PETROLEUM CON	PANY						30-	-015-2679	91	
P.O. BOX 37, LOCO HI	LLS, NEW	MEXIC	XX 88	255						
Reason(s) for Filing (Check proper box)		Change in		ler of:	Othe	er (Please expla	in)			
New Well A Recompletion	Oil									
Change in Operator	Casinghea	d Gas	Condens	ate	<u></u>	<u> </u>		<u> </u>		
If change of operator give name and address of previous operator		<u></u>								
II. DESCRIPTION OF WELL	AND LE		1							ease No.
Lease Name H.E. WEST ''B''		Well No.	GRAY	BURG -	- JACKSON	ſ		l of Lease , Federal or Fe	-	9426-B
Location		l,				<u> </u>				
Umt LetterM	:130	)5	Feet Fro	m The <u>S(</u>	DUIH Line	and <u>1305</u>	I	Feet From The	WEST	Li
Section 3 Townsh	hip T175		Range	R31E	, NN	мрм, E	EDDY			County
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil		OF OF O or Conder		<u>) NATU</u>	RAL GAS	e address to wi	hich approve	d copy of this j	form is to be se	ent)
TEXAS NEW MEXICO PIPE	TINE CO		l		P.O. BC	X 2528,	HOBBS,	NM 882	41-2528	
Name of Authorized Transporter of Casil CONOCO INCORPORATED	nghead Gas	¥.	or Dry C	das 📃	Address (Give P.O. BOX	e address 10 w/ X 1267, 1	NCA C	d copy of this I ITY, OK	form is to be so 74603	ent)
If well produces oil or liquids,	Unit	<b>Sec.</b> 3	Twp. 17S	<b>Rge</b> . 31E	Is gas actually		Whe			
give location of tanks.	М	1 3	$\mathbf{I} \perp IS$	• 31E		-	1	+=		
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IV. COMPLETION DATA		ner lease or	pool, give	L	New Well		Deepen	Plug Back	Same Res'v	Diff Res
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1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.