DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator MYCO Industri Address 207 S. 4th St Reason(s) for filing (Check proper box) New Well Recompletion	AUTHORIZATION TO TRAN RECEIVED BY OCT 29 1986 O. C. D. ARTESIA, OFFICE Creet Artesia, NM 882 Change in Transporter of:		Form C-104 Supersedes Old C-104 and C-110 Elfective 1-1-65
Change in Ownership	Casinghead Gas Condenso		a, NM 88210
1.4	Well No. Pool Name, Including Form 2 Atoka—San Andre	mation Kind of Lease	Fee Fee West
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Navajo Refining Co. Name of Authorized Transporter of Cast Phillips Petroleum Co. If well produces oil or liquids, give location of tanks.	Inghead Gas 🛣 or Dry Gas 🗀	Address (Give address to which approved PO Drawer 159 Artesia Address (Give address to which approved	copy of this form is to be sent) Texas 79762
COMPLETION DATA Designate Type of Completio	n - (X) Date Compl. Ready to Prod.	New Well Workover Deepen P	lug Back Same Res'v. Diff. Res'v.
Perforations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	:	Pepth Casing Shoe
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT Pat ID-3 11-7-86 chg. op.
TEST DATA AND REQUEST FOOLL WELL Date First New Oil Run To Tanks	OR ALLOWABLE (Test must be aft able for this dep	ter recovery of total volume of load oil and oth or be for full 24 hours) Producing Method (Flow, pump, gas lift, o	etc.j
Length of Test Actual Prod. During Test	Tubing Pressure Oil-Bbis.		Choke Size
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) OIL CONSERVAT	Choke Size
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.		APPROVED OCT 30 1986 . 19 Original Signed By Mike Williams TITLE Oil & Gas Inspector	
(Signature) Engineer (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.	

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

September 1, 1986

(Date)