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Elevation: DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Date Spt. 3			
		Total Denth	P.B.T.D.
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	h that from any other lease or pool,	give commingling order number:	
If well produces oil or liquids, give location of tanks. A 13 205 28E		i	
	Unit Sec. Twp. 'Ege.	Is gas actually connected?	er.
Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
Navajo Crude Oil Pu	rchasing	P O Draver 159 Art	esia. NM 88210
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA XX or Condensate	S Address (Give address to which appro	ved copy of this form is to be sent)
line of Section 13 Tov	mship 205 Range	28E , NMPM,	Eddy County
Unit Letter;660	Feet From TheNLin	e and <u>1980</u> Feet From	The
		25	
Lease Name	Well No. Pool Name, Including F		e Lease No.
	LEASE		
and address of previous owner	Daiber Ull, Inc.,	P. U. BOX 1658, Carl	sbad, NM_88220
	Barbor Otl -		
Change in Ownership			
New Well	Change in Transporter of: Oil Dry Go	rs	
)	Other (Please explain)	
Address		88211-0798	
	D. Collier		
PRORATION OFFICE	ARTESIA, OFFICE		
	O. C. D.		
TRANSPORTER GAS	SEP 3 0 1986		
LAND OFFICE			
U.S.G.S.	AUTHOREZAETVONDTRYTRA		GAS
	REQUEST		Supersedes Old C-104 and C-110 Effective 1-1-65
DISTRIBUTION	•	CONSERVATION COME ION	Form 2-164
NO. OF COFES PLEE VEE	• ==·	· · · ·	
	LAND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator Timothy Address P. O. Bo Reason(s) for filing (Check proper box, New Well Recompletion Change of ownership give name and address of previous owner DESCRIPTION OF WELL AND Lease Name TURNER Federal Location Unit Letter 660 Line of Section 13 Tow DESIGNATION OF TRANSPORT Name of Authorized Transporter of CI: Navajo Crude Oil Pu Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tarks. If this production is commingled wit COMPLETION DATA Desi: ate Type of Completio Date Spu. 3 Elevation: DF, RKB, RT, GR, etc.,	SANTAFE REQUEST FILE U.S.G.S. LAND OFFICE OIL TRANSPORTER OIL GAS O.C.D. PRORATION OFFICE SEP 3 0 1986 OPERATOR O.C.D. PRORATION OFFICE Collier Address P.O. BOX 798, Artesia, NM Recoon(s) for filing (Check proper box) New Well New Well Change in Transporter of: Recoon(s) for filing (Check proper box) Onl New Well Change in Transporter of: Recompletion OIL Change in Ownership give name Barber Oil, Inc., : and address of previous owner Barber Oil, Inc., : DESCRIPTION OF WELL AND LEASF Line of Section Location C Unit Letter : 660 Feet From TheN Unit Letter : 13 Township 20S Pange DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GA Name of Authorized Transporter of Casinghead Gas	SANTA FE REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AND LAND OFFICE ITHORECEIVED TONT OIL AND NATURAL (IRANSPORTER OIL OPERATOR SEP 3 0 1986 OPERATOR SEP 3 0 1986 OPERATOR SEP 3 0 1986 OPERATOR No PROPATION OFFICE SEP 3 0 1986 OPERATOR ON BOX 798, Artesia, NM 88211-0798 Reconcision (Check proper box) Antesia, OFFICE New Well Change in Transporter of: Change in Ownership (Check proper box) Other (Please explain) New Well Change in Transporter of: Change in Ownership (Check proper box) Other (Please explain) New Well Change in Transporter of: Change in Ownership (Check proper box) Other (Please explain) New Well Change in Transporter of: If change of ownership (Mathematication) Exestence Description OF WELL AND LEASE Kind of Leos Leoration Yeal No. Pool Name, Including Formation Unit Letter : 660 Feet From The Line end Unit Letter