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" Choke Size " Oil " Water " Gas " AOF " Test	" Test Method	
⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION	SION	
knowledge and belief. Signature: SUPERVISOR DISTRICT II		
Printed name		
Tim Goudeau Tike: Region Manager Approval Date: ADD 1.0. 1000	<u> </u>	
Date: 4-8-96 Phone: 915 682-0095	;;;;;;;	
⁴ If this is a change of operator fill in the OGRID number and name of the previous operator		