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DISTRIBUTION TO THE SANTA FE.		CONSERVATION COMMISSION	Form 1-1 4
FILE	REQUES	ST FOR ALLOWABLE	Supersedes Old C-104 and C- Offective 1-1-65
U.S.G.S.	AUTHORIZATION TO T	AND RANSPORT OIL AND NATURAL GA	
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Alvesto	o Oil Producing Company		
Reason(s) for filing (Chee) proper b		Other (Please explain)	
New Kell. ≡	Change in Transporter of:	To correct well :	list i ng
errompietti		MMOCC Memo 2-65	
Than years the winds and	Dasinghead Gas Pon	Tensite (Roman) tr choum as	Federal Scott #9)
change of ownership give name nd address of previous owner	2	(I OZ MET Z.J. E.ROWIT GE	
DESCRIPTION OF WELL AN		Name, including Formation	Kind of Lease
S. Scott Federal		A Viete Common - Delegto	State, Federal or Fed.
Shirt Settler 🛒 🗜 🔒 🕒 🗀	1850 Feet From The North	.ine mi <u>790</u> Fron. 15	. West
time of Names 23 , 7	Township 27N Hamue	11W , NMPM, San Ju	an County
	RTER OF OIL AND NATURAL	GAS	
Name of Authorized Transporter of C	Cil or Condensate	Address (Give address to which approve	eton. New Mexico
PRETWENTED (ACTUAL)		r. U. Dox 1702, rarmin	Footie non moreon
McWood Corp.	Casinghead Gas 😭 or Dry Gas	P. O. Box 1702, Farmin	
Mewood Corp. Time of Authorized Transporter of the Southern Union Gas	_	Address (Give address to which approved Union Tower Building,	d copy of this form is to be sert)
Nume of Authorized Transporter of C	_	Address (Give address to which approve Union Tower Building, Is gas actually connected? When	d copy of this form is to be sert) Dallas, Texas
Southern Union Gas If well produced thinks, it well produced this or liquids, it we location of tanks.	S Company Unit Sec. Twp. Age. E 23 27N 11 with that from any other lease or poor	Address (Give address to which approve. Union Tower Building, Is gas actually connected? Yes Vien	d copy of this form is to be sert) Dallas, Texas
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Supervisor Dist. # 3

Origi-

Nae R. Stone

August 12, 1965

Field Superintendent (Title)

iDatei

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. (Signature)

 $\,$ All sections of this form must be filled out completely for allowable on new and recompleted wells.

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.