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DISTRIBUTION		CONCERNATION COMMISSION	Form C - 104	
SANTA FE		_ CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110	
		REQUEST FOR ALLOWABLE Effective 1-1-65		
FILE /-		AND	L GAS REGETVED	
U.S.G.S.	AUTHORIZATION 1	RANSPORT OIL AND NATURAL	L GAS (% % %)	
LAND OFFICE		Table 1	▲ ★ ★ ★	
TRANSPORTER GAS		r. Tu. C. T. g	SEP 1 8 1987	
OPERATOR 5	Sam o	Donations	g+ q = - € *	
PRORATION OFFICE		20 m. Uli Coerations,		
Operator	Tohh	box 3095	gr 1 , , , , substituti	
DR. SAM	G. DUNN OY 192. ARTESIA. NE	ock, Texas 79410 FEB ock, Texa	t 6 1968	
Reason(s) for filing (Check proper bo		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion		y Gas		
Change in Ownership	Casinghead Gas Co	ndensate		
If change of ownership give name and address of previous owner				
I. DESCRIPTION OF WELL AND	Lease No. Well No. Poo.	Name, Including Formation	Kind of Lease	
MCALESTER STATE		COYOTE QUEEN	State, Federal or Fee STATE	
Location				
Unit Letter L ; 16	50 Feet From The SOUTH	Line and 330 Feet Fi	rom The WEST	
Line of Section 10 T	Township 11-S Range	27-K , NMPM,	CHAVES County	
		G 4 C		
I. DESIGNATION OF TRANSPO Name of Authorized Transporter of	RTER OF OIL AND NATURAL	Address (Cine address to which a	pproved copy of this form is to be sent)	
I Name of Authorized Transporter of (or Condensate		pproced copy a, since justice is	
Name of Authorized Transports of	AMTON	i		
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THE PERMIAN CORPOR	ration	MIDIAND TH		
THE PERMIAN CORPOR	Casinghead Gas or Dry Gas	MIDIAND THE Address (Give address to which a	EXAS pproved copy of this form is to be sent)	
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VI. CERTIFICATE OF COMPLIANCE

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.

erth in the second	
The mo Hall	(Signature)
AGENT	
	(Title)
9-15-67	
	(Date)

OIL CONSERVATION COMMISSION

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APPROVED	75	
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This form is to be filed in compliance with RULE 1104.

TITLE .

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.

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