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NO. OF COPIES RECEIVED			
DISTRIBUTION		OIL CONSERVATION COMMISSION	Form C-104
SANTA FE	REQL	JEST FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
FILE /-	_	AND	
U.S.G.S.	_ AUTHORIZATION TO	TRANSPORT OIL AND NATURAL GA	45
LAND OFFICE	-		
TRANSPORTER GAS			
OPERATOR /			
PROPATION OFFICE	<del></del>		
Cperator			
DEPCC, Inc.			
Suite 204, First Nat Reason(s) for filing (Check proper bas	tional Bank, Artesia	, New Mexico Other (Please explain,	
New Well	Change in Transporter of:		
Recompletion.	oi:	Dry Gas	
Change in Ownership	Casinghead Gas	Condensate	
f change of ownership give name			
ond address of previous owner			
Lease Name	Lease No. Well No. P	Pool Name, Instituting Formation	Kind of Lease
State 647	647 219	Artesia Queen, Grbg., SA	State, Federal or Fee State
=	950 Feet From The South	Line and 660 Feet From T	he <b>East</b>
Line of Section 31 To	ownship 178 Ran	ge <b>28E</b> , NMPM, I	Eddy County
Continental Gil Con Name of Authorized Transporter of Co	asinghedd Gas or Dry Gas	Artesia, New Mexico  Autress (Give address to which approv	ed copy of this form is to be sent)
Phillips Petroleum ( If well produces oil or liquids, give location of tanks.	asinghed Gas Company Company Unit Sec. Two. 5	Address Give address to which approve Odessa, Texas  lige. Is gus actually connected? Whe Yes	ed copy of this form is to be sent)
Phillips Petroleum ( If well produces oil or liquids, give location of tanks.	Company  Com	Address Give address to which approve Odessa, Texas  lige. Is gus actually connected? Whe	ed copy of this form is to be sent)  r.  May 15, 1967
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Engineering Assistant

May 15, 1967

(Date)

(Title)

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.

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