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NO. OF COPIES RECEIVED	· · ·	\sim						
DISTRIBUTION	JEW MEXICO OIL C	ONSERVATION COMMISS.	Form C-104					
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110					
FILE		AND	Effective 1-1-65					
	AUTHOPIZATION TO TRANSPORT OIL AND MATLEAL GAS							
U.S.G.S.								
LAND OFFICE	25 PM '69							
TRANSPORTER OIL		,						
GAS	_	•						
OPERATOR								
PROBATION OFFICE								
Cperator	(Yait							
UNION TEXAS PETRO								
Address								
1200 Itilaa Buildi	ng - Midland, Texas 797	01 :						
Reason(s) for filing (Check proper bo		• Other (Please explain)						
	Change in Transporter of:	Change well na	me and number					
New Well			Federal No. 11 (Battery 2)					
Recompletion		E = 1						
Change in Ownership	Casinghead Gas Conder	nsate Effective 8-1.	-09					
		ر						
If change of ownership give name and address of previous owner		······································						
H. DESCRIPTION OF WELL AND	LEASE							
Lease Name	Well No. Pool Name, Including F	ormation Kind of Let						
Milnesand Unit	311 Milnesand - S	San Andres State, Fede	ral or Fee Federal LC060978					
Milnesand Unit								
ļ.	North	ne and 1980 Feet From	m The East					
Unit Letter B;660)Feet From The North Lir							
		35-F , NMPM, RC	osevelt County					
Line of Section 19 To	ownship \mathcal{E} -S Range	35-Е , МАРМ, КС						
III. DESIGNATION OF TRANSPOR	ITER OF OIL AND NATURAL GA	15 Cine address to which any	roved copy of this form is to be sent)					
Name of Authorized Transporter of O	il 🔀 or Condensate 🗌	Address (Give dadress to which app						
Mobil Pipeline Co	ompany	Box 900 Dallas,	<u>Fexas 75221</u>					
Name of Authorized Transporter of C	asinghead Gas 🖄 or Dry Gas 🗔	Address (Give address to which app	proved copy of this form is to be sent)					
Warren Petroleum		Box 1589 - Tulsa,	Oklahoma 74102					
	Unit Sec. Twp. Rge.		When					
If well produces oil or liquids,	C 19 8-S 35-E	yes	September 19, 1963					
give location of tanks.								
If this production is commingled w	with that from any other lease or pool,	give commingling order number:						
IV. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
	Off Well Gas Well	New Well Workover Despen						
Designate Type of Complet	$10n - (\Lambda)$							
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevetions (DE RKR RT CR etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth					
	Name of Producing Formation	Top Oil/Gas Pay						
Elevations (DF, RKB, RT, GR, etc.) Perforations	Name of Producing Formation	Top Oil/Gas Pay	,					
			,					
	TUBING, CASING, AN	D CEMENTING RECORD	,					
			Depth Casing Shoe					
Perforations	TUBING, CASING, AN	D CEMENTING RECORD	Depth Casing Shoe					
Perforations	TUBING, CASING, AN	D CEMENTING RECORD	Depth Casing Shoe					
Perforations	TUBING, CASING, AN	D CEMENTING RECORD	Depth Casing Shoe					
Perforations	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD	1 Depth Casing Shoe SACKS CEMENT					
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August 15, 1969 (Date)

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oble	0'n	new	and	ree	comp	leted	well	8.					

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. Fill out only Spectron sporter, or other such change of concerned well name or number, or transporter, or other such change of concerned Separate Forms C-104 must be filed for each pool in multiply completed wells.