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HO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL	Form C-104 FICE O. C. Sepersedes Old C-104 and C- Effective 1-1-65	
SANTA FE	REQUES	T FOR ALLOWARI FIUEBS OF	FICE D & Supersedes Old C-104 and C-
FILE		AND	Effective 1-1-65
U.S.G.S.	ALITHOPIZATION TO TE	RANSPORT OIL AND 22 URA	i con con
LAND OFFICE	AUTHORIZATION TO TE	KANSPURT UIL ANDMALEURA	-36 ⁴ 77 '[[
TRANSPORTER OIL GAS	<u> </u>		•
OPERATOR			
Operation OFFICE		****	
Address Address	n Petroleum Corp Now Mexico 88	<i>y</i> .	
Reason(s) for filing (Check proper be	May Mexico 88	Other (Please explain)	
New Well	Change in Transporter of:		11-7766
Recompletion	Oil Dry	Effective ,	/-2D-66
Change in Ownership		lensate Formery: f.	11-22-66 Perman Corp. (Trucks
If change of ownership give name and address of previous owner	- Signed	·	•
DESCRIPTION OF WELL AND			
Leane Name	Well No. Pool Name, Including	~ /	
WOLF tederal	+ CHAVEROC	San Andres State, Fed	deral of Fee Federal 0164650
Unit Letter A ;	660 Feet From The North L	ine and . 660 Feet Fro	om The <u>East</u>
Line of Section 19 T	ownship 7-5 Range	34-E , NMPM, RO	popult county
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G	IAS	
Name of Authorized Transporter of O			·············
1 m //·// //		Addisas (otte desices to which up	proved copy of this form is to be sent)
ITHORIN FIND TIMO	Co.	Box 900 Only	proved copy of this form is to be sent)
Name of Authorized Transporter of C	Gainghead Gas Or Dry Gas O	Box 900 April	as Texas
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Box 900 April	proved copy of this form is to be sent) A Texas proved copy of this form is to be sent)
Name of Authorized Transporter of C		Box 900 Dall Address (Give address to which ap	proved copy of this form is to be sent)
Name of Authorized Transporter of C If well produces oil or liquids, give location of tanks.	G. gasinghead Gas or Dry Gas Unit Sec. Twp. Rge. B 19 7 34	Box 900 April	as Texas
If well produces oil or liquids, give location of tanks. If this production is commingled w	Unit Sec. Twp. Rge.	Address (Give address to which ap	proved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. If this production is commingled we COMPLETION DATA	Unit Sec. Twp. Rge. 8 19 7 34 With that from any other lease or pool	Address (Give address to which ap	na Texas proved copy of this form is to be sent) When
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VI.

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is the and complete to the best of my knowledge and belief.

Foreman 0+3-NMOCC-H

(Tiple)

1-SUSP 1- RRY

1-NSW 1-CV BAYES 11-22-66

APPROVED	5	<u> </u>		
BY				
TITLE		be Dist	rict 9	

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.