17 116 4.10	TA FE, NEW MEXICO opies with the appropriate district office)
	COMPLIANCE AND ANTER RIZATION 11 11
	ORT OIL AND NATURAL GAS
A	
Company or Operator <u>Cities</u>	<u>Lease</u> Drickey Queen Sand
	LS 15 T 145 R 310 Pool Caproche Cusar
County <u>Chaves</u> Ki	nd of Lease (State, Fed. or Patented) Federal
If well produces oil or condensate	e, give location of tanks: Unit L S 15 T 148 R
Authorized Transporter of Oil or	Condensate Toxes-New Maxico Fipeline Company
Address <u>Pox 1510, #idland</u> (Give address to whic	the approved copy of this form is to be sent?
Authorized Transporter of Gas	
Address	Date Connected
(Give address to which	Date Connected
lf Gas is not being sold, give rea	sons and also explain its present disposition:
No Transporte	n svrilabla
Reasons for Filing: (Please check	() One): Oil () Dry Gas () C'head () Condensate ()
Change in Transporter of (Check	One): Oil () Dry Gas () C'head () Condensate ()
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Change in Transporter of (Check	One): Oil () Dry Gas () C'head () Condensate ()
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