NO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
FILE		AND	
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	. GAS
TRANSPORTER			
GAS			
OPERATOR			
Operator Operator			
McAlester Fue	el Company	·	
P. 0. Box 10	Magnolia, Arkansas 717	53	
Reason(s) for filing (Check proper		Orher (Please explain)	
New Well	Change in Transporter of:	' ' ' ' '	
Recompletion	Cii Dry Go	ns _	
Change in Ownership	Casinghead Gas X Conde	nsate	
If change of ownership give name			
and address of previous owner			
. DESCRIPTION OF WELL AN	ID LEASE		Todaya!
New Mexico Pederal		me, Including Formation <b>adiola Devonian</b>	Kind of Lease Federal State, Federal or Fee
Location		actora perolizar	
Unit Letter 0 ; 60	60 Feet From The South Lin	ne and <b>1980</b> Feet Fro	om The <b>East</b>
		8 E NAME Les	
Line of Section 6	Township LE B Range 3	O E , NMPM, Dee	County
Name of Authorized Transporter of		Address (Give address to which ap	proved copy of this form is to be sent)
Name of Authorized Transporter of	Casinghead Gas 🛣 or Dry Gas 🗌	Address (Give address to which applied P.O.Box 1589 Tulse	proved copy of this form is to be sent)  2, Ok. 74102
Name of Authorized Transporter of	Casinghead Gas 🛣 or Dry Gas 🗌	Address (Give address to which approximately P.O.Box 1589 Tulse Is gas actually connected?	proved copy of this form is to be sent)
Name of Authorized Transporter of Warren Petroleum Com If well produces oil or liquids, give location of tanks.  If this production is commingled	Casinghead Gas (A) or Dry Gas pary  Unit Sec. Twp. Rge.	Address (Give address to which apply the problem of	proved copy of this form is to be sent)  a, Ok. 74102  When Buccessor to Sinclair
Name of Authorized Transporter of Warren Petroleum Com  If well produces all or liquids, give location of tanks.  If this production is commingled COMPLETION DATA	Casinghead Gas or Dry Gas percent Sec. Twp. Rge.  O 6 128 388  I with that from any other lease or pool,	Address (Give address to which apply the problem of	proved copy of this form is to be sent)  a, Ok. 74102  When Buccessor to Sinclair
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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.

(Signature)

(Date)

January 2, 1976

OIL CONSERVATION COMMISSION

APPROYED TITE DOMINGO <del>DISTRICT</del>

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 Sections I, II, III, and VI only 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.