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DISTRIBUTION		L CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUE	ST FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-65
FILE U.S.G.S.		AND HO	BBS DEFINE A
LAND OFFICE	AUTHORIZATION TO		
OIL		MAR	1 10 21 AM 65
TRANSPORTER GAS			10 ET HII DJ
OPERATOR			
PRORATION OFFICE			,
Operator Standard ()1	Company of Wayse	a dist of Coliforni	a Off Company
Address	r company or rexar,	a div. of Californi	R OLL Company
3610 Ave. S,	Snyder, Texas	79749	
Reason(s) for filing (Check proper be	ox)	Other (Please explain)	
New Well	Change in Transporter of:	Former	owner and operator
Recompletion	=	^{r Gas} 🔚 Leona rd	Nichols
Change in Ownership	Casinghead Gas Co	ndensate	
If change of ownership give name	Leonard Nichols,	Dox 123. Maljam	ar. N. M.
and address of previous owner			
DESCRIPTION OF WELL ANI	D LEASE		
Lease Name	Well No. Poo	Name, Including Formation	Kind of Lease
Mitchell Federal	2	Maljamar (G-SA)	State, Federal or Fee Fed.
Location	o South	1090	Fort
Unit Letter 0 66	Feet From The South	Line and 1980 Feet F	From The East
•	ownship 17 Range	% O T	Lea County
Line of Section 8 , T	Yownship 17 Range	32 , NMPM, 1	County
	DEED ON ON AND MARKEDAY	G A G	
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL or Condensate	Address (Give address to which a	approved copy of this form is to be sent)
		·	
Continental Pipeline Co. Name of Authorized Transporter of Casinghead Gas or Dry Gas			
Name of Authorized Transporter of C	Casinghead Gas a or Dry Gas	Artesia, N. M. Address (Give address to which a	approved copy of this form is to be sent)
	Casinghead Gas 🚺 or Dry Gas 🗌	Address (Give address to which a	approved copy of this form is to be sent)
Phillips Petroleu	Casinghead Gas 🚺 or Dry Gas 🗌	Address (Give address to which a Bartlesville, Is gas actually connected?	approved copy of this form is to be sent)
	Casinghead Gas 📉 or Dry Gas 🗌	Address (Give address to which a Bartlesville, Is gas actually connected?	ipproved copy of this form is to be sent) Okla.
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TITLE _

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.

This form is to be filed in compliance with RULE 1104.

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.

I. C. Helm

(Signature)

(Title)

(Date)

Production Foreman

February 26, 1965