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OPERATOR Company or Operator			IGINAL AND 4 C	COPIES WITH	Lease	RIATE OFFICE	M '64	Well No.
Unit Letter		r Oll & Gas Fownship	Range		State B 1576		2	
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	ces oil or conder cation of tanks	isate	Unit Letter	Sectio		175	Range	35E
Authorized transporter of Texas New Mea	<u> </u>	Line Company	ually Connecte	Bex 15 Midlan		h approved copy o	f this form	is to be sent)
Authorized transporter of If gas is not being sold,			Date Con- nected		address to whic	h approved copy o	f this form	is to be sent)
<u></u>		REASON	(S) FOR FILING	(please checi	k proper box)	<u></u>		<u></u>
	Change in Tran Oil	sporter (check one) Dry Ga I gas Conder	as	Change in O Other <i>(expla</i> :			]	
		otod - batte						
The undersigned certi							with.	
		nis the	day of	July By	, 19 <b>6</b>			
Approved by Title		ON COMMISSION	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Title		Miter Engineer 011 & Gas	Compan	<b>y</b>
Đăte				Address	Box 1920	, Hobbs, Ne	w Mesci	co 88240