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DISTRIBUTION			CONSERVATION COMMISSION	
SANTA FE FILE				Supersedes Old C-104 and C-1. Effective 1-1-65
U.S.G.S.	AUTHO	RIZATION TO TR	AND ANSPORT OIL AND NAT	TURAL GAS
LAND OFFICE				OUT 15 4 19 PW 105
TRANSPORTER OIL				'n oj
OPERATOR GAS				
PRORATION OFFICE			NA	ME CHANGE
Cperator			ATI	ANTIC P. L. CO.
Gulf Oil Corpor	ation		4.70	TO
	57 67		Ali	CO P.L. CO.
Reason(s) for filing (Check pr	roper box)		Other (Please exp	EFF. 1-1-71
New Well	Change in '	Transporter of:	i i	well number - formerly
Recompletion	Oil	Dry G	as	went remote - formerta
Change in Ownership	Casinghead	d Gαs Conde	Fortlandt	Rumont Unit No. 33-9
If change of ownership give and address of previous own			Northwest	Eumont Unit "33" Well No. 90
II. DESCRIPTION OF WELI	L AND LEASE			
Lease Name Northwest Bumon	t Undt	158 -	ame, Including Formation BONG - Queen	Kind of Lease State, Federal or Fee
Location Unit Letter	, 330 Feet From	. The east	ne and 1650 F	eet From The
Line of Section 33	, Township 198		36R , NMPM,	Ton County
Eine of Section	, rownship	Trange	, retail tell	County
II. DESIGNATION OF TRAN				
	ter of Oil Jon Cor			
At Tention Designations		ndensate 🗀 Co.	· .	tich approved copy of this form is to be sent)
Name of Authorized Transport	goda. Pipeline	Co.	Box 1190, Midles	
1	ter of Casinghead Gasage	Co.	Box 1190, Midles	ich approved copy of this form is to be sent)
Name of Authorized Transport	ter of Casinghead Gastri m Corporation	or Dry Gas	Box 1190, Midles Address (Give address to wh	Texas sich approved copy of this form is to be sent) (Clahoma 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 true and complete to the best of my knowledge and belief.

Area Production Manager (Title)

July 13, 1965 (Date)

19 65 Supervisor, District #1

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.

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