NO. OF COPIES RECEIVED	, = -		₹		
DISTRIBUTION	NEW MEXIC	CO OIL CONSERVATION COM	MISSION	Form C-104	
SANTA FE	RE	QUEST FOR ALLOWABLE			d C-104 and C-1
FILE		AND		Effective 1-1-6	55
U.S.G.S.	AUTHORIZATION	TO TRANSPORT OIL AND	NATURAL GAS		
011	<del>- †</del> :				
TRANSPORTER GAS	<u> </u>				
OPERATOR					
PRORATION OFFICE					
Operator		· · · · · · · · · · · · · · · · · · ·			
Getty	Oll Company				
Address				<del></del>	
P. O.	Box 249, Hobbs, New Ma	nde 88240			
Reason(s) for filing (Check prop	er 50x)	Other (Flea)	re explain,		
New Well	Change in Transporter o	<b>f</b> :			
Recompletion	Cil =	Div Gas			
Change in Ownership	Casinghead Gas	Condensate			
If change of ownership give no and address of previous owner	ame Fiderates M1 Co	manny, P. C. Post 249	. Hobbs New	Messico 8824	0
DESCRIPTION OF WELL	AND LEACE				
Lease Name	Unit Well No.   Fact Mame, In	noluding Formation	Kind of Lease		Lease Ni
East E		mont Queen	State, Federal or F	ee State	B-935
Location					
Unit Letter <b>E</b> ;	1980 Feet From The Nor	rth Line and 660	Feet From The	West	
Line of Section ${f 1}$	Township 205	Ranae <b>37E</b> , MAR	u,	Lea	Terunity
DESIGNATION OF TRANS Name of Authorized Transporter Rame on Authorized Transporter		Address (Git e address	to which approved c		
Name of Authorized Transporter Name of Authorized Transporter	of Cil or Condensate	Address (Give address	to which approved c		
Name of Authorized Transporter  Name of Authorized Transporter  If well produces oil or liquids, give location of tanks.	of Casingheal Gas or Cry Ga	Address (Give address  Address (Give address  Ble. Is gas artically monor	to which approved c  to which approved c  to 12 Wilen		
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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.

C. S. Wade_	
(Signature)	
Area Superintendent	_
_	
September 30, 1967	

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APPROVE	
BY	g-12 Rania
77	SUBSPINISOR DISTRICT
TITLE/	SURRYISOR US INCLA

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.

Ail sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI 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.