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| Unit Letter 0:660 Peet From The South Line and 1980 Feet From The Best Line of Section 2, Township 20 8 Range 37 R, NMFM, Les Country II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent) Texas New Mexico Pipe Line Company Rox 1510, Midland, Texas | ŀ | | | | | | | | | | |
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| Name of Authorized Transporter of Casinghead Gas | | | | | Compan | SY. | Box 1 | 510, Midland | Texas | | |
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Original Signed By: B. M. BREINING Area Engineer (Title)

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.

Length of Test

Tubing Pressure

GAS WELL

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

Gravity of Condensate

Choke Size

Bbls. Condensate/MMCF

Casina Pressure

APPROVED TITLE .

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.