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If esting Method (pitot, back pr.) Itubing Pressure (Shut-in) Casing Header (and n) VJ. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complied with and that the information given above Division have been complete to the best of my knowledge and belief. Mark 2 U 1990 Date Approved Mark 2 U 1990 Date	ACIUAL FTOD. 1681 + MCF/D	Longui or Four						
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. MAR 2 U T990 Date Approved Signature Rhonda Hunter Prod. Asst. Title 3/16/90 915-684-6631	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size	Choke Size	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. MAR 2 U T990 Date Approved Signature Rhonda Hunter Prod. Asst. Title 3/16/90 915-684-6631	VI OPERATOR CERTIFIC	ATE OF COMF	LIANCE		00105			
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Printed Name Title DISTRICT I SUPERVISOR 3/16/90 915-684-6631 Title	Signature Rhonda Hunter	Prod.						
3/16/90 915-684-6631 Date Telephone No.	Printed Name		Title	Title	וע	STRICT I SUPERVI	3UK	
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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