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| DISTRIBUTION   | NEW MEXICO OIL CONSERVATION COMMISSIC.   |  |  | SIC.   | Form C-104 Supersedes Old C-104 and C-11   |  |                           |
| SANTA FE   | -  | REQL   | JEST FOR ALL   | OWABLE   |  | Effective 1-1-65   |                           |
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| U.S.G.S.   | AUTH   | IORIZATION TO  | TRANSPORT  | OIL AND N  | ATURAL GAS   | 1  |                           |
| LAND OFFICE  |  |  |  |  |  |  |                           |
| FRANSPORTER  |  |  |  |  |  |  |                           |
| OPERATOR   | -:   |  |  |  |  |  |                           |
| COORATION OFFICE   | [  |  |  |  |  |  |                           |
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| If change of ownership give name and address of previous owner   | LEACE  | //3  |  |  |  |  |                           |
| I. DESCRIPTION OF WELL AND   | LEASE  | Well No.   | 'ool Name, Includin  | g Formation  | K  | ind of Lease   |                           |
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| Location   | 565  | ¥-23-7   |  |  | <u>'</u>   |  |                           |
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| Late First New Cil Run To Tanks | Date of Test    | Froducing Method (Flow, pun | np, gas lift, etc.) |
|---------------------------------|-----------------|-----------------------------|---------------------|
| Length of Test                  | Tubing Fressure | Casing Pressure             | Choke Size          |
| Actual Fred. During Test        | Oil-Bbls.       | Water-Bbls.                 | Gas-MCF             |
|                                 |                 |                             |                     |

Bbls. Condensate/MMCF

Casing Pressure

. esting Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Actual Fred. Test-MCF/D

**GAS WELL** 

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.

(Date)

| 12912mlan 3              |   |
|--------------------------|---|
| (Signature)              |   |
| Area Iroduction Heat for | - |

Length of Test

Tubing Pressure

(Title)

June 27, 1965

| $\cap$ $\square$ | CONSE | RVΔ | TION | COM | MISSIO | N |
|------------------|-------|-----|------|-----|--------|---|

Choke Size

Gravity of Condensate

| APPROVE | mo B 32                | 19 |
|---------|------------------------|----|
| BY      | 28 X X Daniel          |    |
| TITLEZ  | ou mydeor, Distráct /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.