STATE OF NEW MEXICO STATE OF NEW MEXICO SANTA FE, NEW MEXICO STSOI SANTA FE, NEW MEXICO STANDARD SANTA FE, NEW MEXICO		· · · · ·
ENERGY AND MAREALS CEPARTMENT       For Cold and Analysis and the form of the state and the state	STATE OF NEW MEXICO	
Image: Section of the section of th		
With a window           Oil CONSERVATION DIVISION           Wand Book             With a window           P. 0. BOX 2088           SANTA FK. NEW MEXICO 87501             With a window           SANTA FK. NEW MEXICO 87501           Weys             With a window           SANTA FK. NEW MEXICO 87501           Weys             With a window           SANTA FK. NEW MEXICO 87501           Weys             With a window           SANTA FK. NEW MEXICO 87501           Weys             Controll           SANTA FK. NEW MEXICO 87501           SANTA FK. NEW MEXICO 87501             Controll           SANTA FK. NEW MEXICO 87501           SANTA FK. NEW MEXICO 87501             Controll           SANTA FK. NEW MEXICO 87501           SANTA FK. NEW MEXICO 87501             Controll           SANTA FK. NEW MEXICO 87501           SANTA FK. NEW MEXICO 87501             Controll           SANTA FK. NEW MEXICO 87501           SANTA FK. NEW MEXICO 87501             Controll           Controll           SANTA FK. NEW MEXICO 87501		Form C-104
Intervent	Distriction	
International and the international production of the international production is compared in the international production is compared in the international production is commanded with the international production is compared in the international production in the international production is compared in the international production is compared in the international production in the international production is compared in the international production in the international production is compared in the international production in the international production is compared in the internation internatintering internation internatinternation inter	SANTA PE OIL CONSERV	
Image of concentration or real       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         Image of concentration or real       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         Image of concentration or real       Check proper base         <	P.O.	
Intervention       Out       AND       AND         Intervention       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         Intervention       Authorization to Transport of       Other (Pitare espina)         Recomption       Comparison       Other (Pitare espina)         Name       Name       Charge in Transporter of         Recomption       Comparison       Other (Pitare espina)         Name       Charge in Transporter of       Name         Recomption       Comparison       Comparison         Intervention       State of the comparison       Comparison         Intervention       State of the comparison       State of the comparison         Intervention       State of the comparison       State of the comparison         Intervention       State of the comparison       State of the comparison         Intervention       State of the comparison       State of the comparison         Intervention       State of the comparison       State of the comparison </td <td>JARIA PE, N</td> <td>EW MEXICO 87501</td>	JARIA PE, N	EW MEXICO 87501
Image: Construction of the consthe construction of the construction of the		
Image: Contract of Cont	TRANSPORTER	the second s
AND         I         AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         I         Converse         CHEVEON U.S.A. TNC.         Address         Rescondio for those (Ask properties)         Image of conversence         Converse         Converse         Conversence         C	RECUEST	FOR ALLOWABLE
Coversion         Chevener         P. O., Box, 670., Hobba, NM         Rescondible (Luby (Cket prover back)         Preversition         Change in Temaporize of:         Rescondible (Luby (Cket prover back)         Name Change Effective 7-1-85         Rescondible (Luby (Cket prover back)         Rescondible (Luby (Cket prover back)         Change in Ownership         Cainchesed Gas         Drug of previous owner         Guilf Oil Corp., P. O. Box 670, Hobbs, NM         B2240         Index Formation (Nett) AND (FEASE)         Less from         Manuel Change (Nett) (Net) (Nett) (Net) (Nett) (Nett) (Net) (Nett) (Net) (Net)	PROBATION DEPINE	
Coversion         Chevener         P. O., Box, 670., Hobba, NM         Rescondible (Luby (Cket prover back)         Preversition         Change in Temaporize of:         Rescondible (Luby (Cket prover back)         Name Change Effective 7-1-85         Rescondible (Luby (Cket prover back)         Rescondible (Luby (Cket prover back)         Change in Ownership         Cainchesed Gas         Drug of previous owner         Guilf Oil Corp., P. O. Box 670, Hobbs, NM         B2240         Index Formation (Nett) AND (FEASE)         Less from         Manuel Change (Nett) (Net) (Nett) (Net) (Nett) (Nett) (Net) (Nett) (Net) (Net)	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
CREWRON U.S.A. INC.         Address         P. O. Box 670. Holbs, NM. 88240         Resconsible fullog (Lock proper bas)         Image: State of the state o		<ul> <li>A state of the second seco</li></ul>
Address       P. O. Box 570. Hohbo. NM 88240         Rescription       Charge in Transporter sit:       Other (Please explain)         New wait       Charge in Transporter sit:       Other (Please explain)         New wait       Charge in Transporter sit:       Other (Please explain)         New wait       Charge in Oversethip       Call         Office in Oversethip       Call       Condensate         If change of oversething give name       Guil 6 011 Corp., P. O. Box 670, Hobbs, NM 88240         If change of oversething give name       Guil 6 011 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 011 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 011 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 011 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 011 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 01 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 01 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 01 Corp., P. O. Box 670, Hobbs, NM 88240         If charge of oversething give name       Guil 6 01 Corp., P. O. Box 670, Hobbs, NM 88240         If charge oversething dive di		
P. O. Box 670. Hobbs. NM       88240         Recently for filing (Creat proper box)       Change in Transporter of:       Dry Ges         In Percentiation in Ownership       Change in Transporter of:       Dry Ges         If change of Ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         If change of ownership give name       Guil Corp., P. O. Box 670, Hobbs, NM       88240         In DESCRIPTION OF WEHL AND LEASE       In Section 32       Township Give name       Control         III DESCRIPTION OF TRANSPORTER OF OIL AND NATURAL CAS       Mame of Awner of Corp. Give Give Guild for the obset of the Guild form is to be start       In Section 50 (Mam of the obset of the Guild form is to be start)         Mame of awner of the off owner of the owner of the owner of the owner own	CHEVRON U.S.A. INC.	and the second
Interesting for fulling (Check proper sor)       Change in Transporter of:       Name Change Effective 7-1-85         Image: A conservation of the source of the sour	Address	
Interentiation (Line of Section 2:1)       Change in Transporter of:       Differ (Picese explain)         Name Change Effective 7-1-85       Name Change Effective 7-1-85         If change of oursership give name       Guif 011 Corp., P. 0. Box 670, Hobbs, NM 88240         If change of oursership give name       Guif 011 Corp., P. 0. Box 670, Hobbs, NM 88240         II. DESCRIPTION OF WELL AND LEASE       Vell You, Pool loging, including Formation         Level have       Marce 2 (Level and the construction of the co	P. O. Box 670, Hobbs, NM 88240	e e de la companya de
Image of average of average stop       Change in Transporter of       Dry Gas       Name Change Effective 7-1-85         Image of average of average stop       Casincheed Gas       Condensation       Name Change Effective 7-1-85         Image of average stop       Culf 011 Corp., P. O. Box 670, Hobbs, NM 88240       Editors of previous average       Lieses         Image of average stop       Mathematical Corp.       Prove Gas       State, Federal of Fee State "       Lieses         Image Stop       Mathematical Corp.       Prove Gas       State, Federal of Fee State "       Lieses         Image Stop       Mathematical Corp.       Prove Gas       State, Federal of Fee State "       Lieses         Image Stop       Mathematical Corp.       Prove Gas       State, Federal of Fee State "       Lieses No.         Image Stop       Mathematical Corp.       Prove Gas       State, Federal of Fee State "       Lieses No.         Image Stop       Mathematical Corp.       Prove Gas       State, Federal of Fee State "       Lieses No.         Image Stop       Prove State       State, Federal of Fee State       Lieses State       Lieses State       Lieses No.         Image State       Prove State       State, Federal of Fee State       Lieses No.       Lieses State       Lieses State         Image State       State       <	Reason(s) for filing (Check proper box)	Other (Please explain)
Image: Standard S	New Well Change in Transporter of:	
Image: Standard S	Recompletion - Cil	Name Change Effective 7-1-85
If change of exmership give name       Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240         II. DESCRIPTION OF WELL AND LEASE       Neil Yo. Pool Name, inclusing formation         Level home       Neil Yo. Pool Name, inclusing formation         Level home       Neil Yo. Pool Name, inclusing formation         Level home       Neil Yo. Pool Name, inclusing formation         Location       Neil Yo. Pool Name, inclusing formation         Location       Neil Yo. Pool Name, inclusing formation         Location       Yell Yo. Pool Name, inclusing formation         Location       Yell Yo. Pool Name, inclusing formation         Location       Yell Yo. Pool Name, inclusing formation         Line of Section 32       Township 31/S         Name el Authersed Transporter of Coll AND NATURAL GAS         Name el Authersed Transporter of Coll Section       Agrees (Size address to watch approved corp of this form to be sent)         Mame el Authersed Transporter of Coll Section       Agrees (Size address to watch approved corp of this form to be sent)         Mame el Authersed Transporter of Coll Section       Agrees (Size address to watch approved corp of this form to be sent)         Mame el Authersed Transporter of Coll Section       Agrees (Size address to watch approved corp of this form to be sent)         Mame el Authersed Transporter of Coll Section       Agrees (Size address to watch approved corp of this form to be sent)		
and address of previous owner       UIII UIII USEP., P. O. Box 6/0, Hobbs, NM 88240         II. DESCRIPTION OF WEHL AND LEASE       Weil No., Pool Mays, including formation         Lease Non- Lease Non- State, Marcal (MCT-C)       Weil No., Pool Mays, including formation         Lease Non- Lease Non- State, Marcal (MCT-C)       Weil No., Pool Mays, including formation         Lease Non- Lease Non- State, Marcal (MCT-C)       Weil No., Pool Mays, including formation         Line of Section 32       Township 7/5         Renge       32/E       NMPM.         Line of Section 32       Township 7/5         Mindelses Transporter of Coll QD       Press Contensate         Margel Authorized Transporter of Coll Coll Contensate       Press Contensate         Margel Authorized Transporter of Coll QD       Press Contensate         Margel Authorized Transporter of Coll Contensate       Press Contensate         Margel Authorized Transporter of Coll Contensation       Press Contensate         Margel Authorized Transporter of Coll Contensation Division have been complete Wath and that the information green is true and comple		Condensate
and address of previous owner       UIII UIII USEP., P. O. Box 6/0, Hobbs, NM 88240         II. DESCRIPTION OF WEHL AND LEASE       Weil No., Pool Mays, including formation         Lease Non- Lease Non- State, Marcal (MCT-C)       Weil No., Pool Mays, including formation         Lease Non- Lease Non- State, Marcal (MCT-C)       Weil No., Pool Mays, including formation         Lease Non- Lease Non- State, Marcal (MCT-C)       Weil No., Pool Mays, including formation         Line of Section 32       Township 7/5         Renge       32/E       NMPM.         Line of Section 32       Township 7/5         Mindelses Transporter of Coll QD       Press Contensate         Margel Authorized Transporter of Coll Coll Contensate       Press Contensate         Margel Authorized Transporter of Coll QD       Press Contensate         Margel Authorized Transporter of Coll Contensate       Press Contensate         Margel Authorized Transporter of Coll Contensation       Press Contensate         Margel Authorized Transporter of Coll Contensation Division have been complete Wath and that the information green is true and comple	If change of ownership give name	
I. DESCRIPTION OF WELL AND LEASE         Lease Nome       Well MD.; Pool Hages, including, formation         Lease Nome       State, Federal of Fee State # 6-1232         Location       State, Federal of Fee State # 6-1232         Location       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, Federal of Fee State # 6-1232         Unit leaver       State, State, Federal of Fee State # 6-1232         Unit leaver       State, State	and address of previous owner Gulf Oil Corp., P. O.	Box 670, Hobbs, NM 88240
Leave Name       Weil Ye. Pool Mage, including Formation       Kind of Leave         Destroy       Accenter       Barnelly       State, Federal or Fee State       B-1232         Location       Barnelly       State, Federal or Fee State       B-1232         Unit Leave       Feet From The State       B-1232         Unit Leave       Township State       B-1232         Unit Leave       Township State       Barnelly         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       NMPM,       Country         Name of Authorized Transporter of Cit       Concense of the address to watch approved copy of this form is to be sent)         Viewed Authorized Transporter of Cit       Concense of the address to watch approved copy of this form is to be sent)         Viewed Authorized Transporter of Cit       Concense of the address to watch approved copy of this form is to be sent)         Viewed Authorized Transporter of Cit       Concense of the address to watch approved copy of this form is to be sent)         Viewed Authorized Transporter of Cit       Concense of the address to watch approved copy of this form is to be sent)         Viewed proved of the address to watch approved copy of this form is to be sent)       State of the address to watch approved copy of this form is to be sent)         Market Proved of the address to watch approved of the address to watch approved copy of the form of the address to watch approved of the form of the address to w		
Literary Area and MCT-C       If and the intervention of the interventinterventintervention of the intervention of the interve	II. DESCRIPTION OF WELL AND LEASE	
Unit Letter all MCT-C       18       State of State *       6-17352         Unit Letter	Lease Name Well No.   Pool Name, including	Formation Kind of Lease
Location       JARCE VE-1732         Unit Letter	Harry Request NCT.C 18 Aline	State Federal on For
Line of Section 3/2       Township 3/15       Range 3/2       , NMPM,       Jea       Country         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of GIL       or Condenate in the condenate in the section of the second peridece will allow of the section of the section o	Location	Male" 6-1732
Line of Section 3/2       Township 3/15       Range 3/2       , NMPM,       Jea       Country         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Clipporter of Concensate       Agrees (Give address to watch approved copy of this form is to be seni)         Name Al Authorized Transporter of Concensate       Address (Give address to watch approved copy of this form is to be seni)         Name Al Authorized Transporter of Concensate Bool       Address (Give address to watch approved copy of this form is to be seni)         Name Al Authorized Transporter of Concensate Bool       Address (Give address to watch approved copy of this form is to be seni)         Name Al Authorized Transporter of Concensate Bool       Address (Give address to watch approved copy of this form is to be seni)         Name Al Authorized Transporter of Concensate Bool       Address (Give address to watch approved copy of this form is to be seni)         Name Al Authorized Transporter of Concensate Bool       If the production is commingled with the form any other lease or pool, give coordingling order number:       Tothe - Bt4         If the production of tensit.       IV and V on reverse side if necessary.       OIL CONSERVATION DIVISION         VI. CERTIFICATE OF COMPLIANCE       Area Engineer       Area Engineer       Title         Area Engineer       Gistensorie       If this form must be filled in completed wila.       If this is a request for allowable for a newly drilled or deepaned wil	E DRED YI H	
Intervention of transporter of oil and performance of authorites transporter of oil performance of authorites transporter of oil performance of the form is to be sent?         Name of Authorites transporter of oil performance of the form is to be sent?         Name of Authorites transporter of oil performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of the form of the form is to be sent?         If theil production is commance of the form any other lease or pool, give coordinging order number:         If the production is commance of the form any other lease or pool, give coordinging order number:         If the production is commance of the form any other lease or pool, give coordinging order number:         If the production is commance of the form any other lease of pool, give coordinging order number:         If the production is commance of the form any other lease of pool, give coordinging order number:         If the production is commance of the dis for anewidy diffied or deepend well, the form must be	Unit Letter; _UBO_ Feet From The Mult L	ine and <u>DSID</u> Feet From The <u>Nest</u>
Intervention of transporter of oil and performance of authorites transporter of oil performance of authorites transporter of oil performance of the form is to be sent?         Name of Authorites transporter of oil performance of the form is to be sent?         Name of Authorites transporter of oil performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of Authorites transporter of cartinghood glos performance of the form is to be sent?         Name of the form of the form is to be sent?         If theil production is commance of the form any other lease or pool, give coordinging order number:         If the production is commance of the form any other lease or pool, give coordinging order number:         If the production is commance of the form any other lease or pool, give coordinging order number:         If the production is commance of the form any other lease of pool, give coordinging order number:         If the production is commance of the form any other lease of pool, give coordinging order number:         If the production is commance of the dis for anewidy diffied or deepend well, the form must be	31 316	ale al anti-
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorised Transporter of Claisanactie         Hame Si Authorised Transporter of Claisanactie         It well production is commingled with that from any other lease or pool, give commingling order number:         Production is commingled with ad that the information given is true and complete to the best of my knowledge and belief.         VI. CERTIFICATE OF COMPLIANCE         I hereby certify that the unformation given is true and complete to the best of mission have be flided or despe	Line of Section 36 Township 3/2 Range	34C NMPM, Lea County
Rame of Authorized Transporter of Cli S       or Condenancie         Hame of Authorized Transporter of Cli S       or Dry Gas         Hame of Authorized Transporter of Cail of Data       Address to watch approved cory of this form is to be sent?         Hame of Authorized Transporter of Cail of Data       Address to watch approved cory of this form is to be sent?         Hame of Authorized Transporter of Cail of Data       Address to watch approved cory of this form is to be sent?         Hereit produces oil or liquids.       Unit       Sec.         If weil produces oil or liquids.       Unit       Sec.         If weil produces oil on liquids.       Unit       Sec.         If weil production is commangled with that from any other lease or pool, give coordingting order number: $P-16-84$ If this production is commangled with that from any other lease or pool, give coordingting order number: $PC - 512$ NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       OIL CONSERVATION DIVISION         Intereby certify that the information given is true and complete to the best of my knowledge and belief.       DISTRICT 1 SUPERVISOR         VI. CERTIFICATE OF COMPLIANCE       DISTRICT 1 SUPERVISOR         If this is a request for allowable for a newly drilled or despend weilt       Attent form must be filled out completely for allowable or othere accordance with RULE 1104.	· ·	
Rame of Authorized Transporter of Cli S       or Condenancie         Hame of Authorized Transporter of Cli S       or Dry Gas         Hame of Authorized Transporter of Cail of Data       Address to watch approved cory of this form is to be sent?         Hame of Authorized Transporter of Cail of Data       Address to watch approved cory of this form is to be sent?         Hame of Authorized Transporter of Cail of Data       Address to watch approved cory of this form is to be sent?         Hereit produces oil or liquids.       Unit       Sec.         If weil produces oil or liquids.       Unit       Sec.         If weil produces oil on liquids.       Unit       Sec.         If weil production is commangled with that from any other lease or pool, give coordingting order number: $P-16-84$ If this production is commangled with that from any other lease or pool, give coordingting order number: $PC - 512$ NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       OIL CONSERVATION DIVISION         Intereby certify that the information given is true and complete to the best of my knowledge and belief.       DISTRICT 1 SUPERVISOR         VI. CERTIFICATE OF COMPLIANCE       DISTRICT 1 SUPERVISOR         If this is a request for allowable for a newly drilled or despend weilt       Attent form must be filled out completely for allowable or othere accordance with RULE 1104.	III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	AL GAS
Image: Stand Stan	Name of Authorized Transporter of Cil 🖉 🖉 or Condensate	Aigross (Give address to which approved copy of this form is to be sent)
Marrie Pettoleum       Unit       Sec.       17 wp.       Rge.       18 qda octually church of the original original oris of the original original oris original o	Levas Then Melias Landing	hallongd Sin A & TIMIGAL
Marrie Pettoleum       Unit       Sec.       17 wp.       Rge.       18 qda octually church of the original original oris of the original original oris original o	Name of Authorized Transporter of Castagnead Gas X or Dry Gas	Address (Give address to which compared and (14)
If well produces oil or liquids. If well produces oil or liquids. If well produces oil or liquids. If well production is commangled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.		al 1-19
eive toertism of tanks.       134 3/5 3/E       1-16-84         If this production is commany if the second production is commany other lease or pool, give commingling order number:       1-16-84         If this production is commany if the second production is commany other lease or pool, give commingling order number:       1-16-84         NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       Dill CONSERVATION DIVISION         I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.       0ill CONSERVATION DIVISION         PROVED       District 1 SUPERVISOR         Real Engineer       Signoisce)         Area Engineer       Gates         (Dates)       (Dates)	the first free im	But 1381, Julsa OF. 14100
If this production is commingled with that from any other lease or pool, give coomingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief. DISTRICT 1 SUPERVISOR TITLE DISTRICT 1 SUPERVISOR TITLE DISTRICT 1 SUPERVISOR This form lis to be flied 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 tabilation of the deviation table on new and recompleted wells. Fill out only Sections 1, II, III, end VI for changes of owner. Well name or number, or transportet, or other such change of condition. Separate Forms C-104 must be filled for each change of condition.		
If this production is commangled with that from any other lease or pool, give commangling order number: <u>PC -5/2</u> NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief. <u>RDDDC</u> <u>Area Engineer</u> <u>(Tuile)</u> 5-31-85 <u>(Date)</u> <b>I</b> this form must be filed for must be filled out completely for allowed Separate Forms C-104 must be filled for each near of condition. <b>Separate Forms C-104 must be filled for each near of condition</b>	1 36 2/3 3/2	- Mrs 1-16-84
NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.	If this production is commingled with that from any other lease or pool	
VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.		pc g/D
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.	NOTE: Complete Parts IV and V on reverse side if necessary.	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.		1
been complied with and that the information given is true and complete to the best of my knowledge and belief. BY	VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
been complied with and that the information given is true and complete to the best of my knowledge and belief. BY	I hereby certify that the piler and completions of the Oil Community Division have	MUG - D 1985
my knowledge and belief.         BY       DISTRICT 1 SUPERVISOR         DISTRICT 1 SUPERVISOR         TITLE       DISTRICT 1 SUPERVISOR         TITLE       DISTRICT 1 SUPERVISOR         Area Engineer       Signature)         (Title)       This form must be accompanied by a tabulation of the deviation	been complied with and that the information given is the and complete to the bert of	APPROVED
R.D.P.t.e       District 1 SUPERVISOR         ITTLE         District 1 SUPERVISOR         This form is to be filled in compliance with AULE 1104.         If this is a request for allowable for a newly drilled or deepened         Signature)         Area Engineer         (Title)         S-31-85         (Date)         (Date)         It out only Sections I. II. III, end VI for changes of counter, well name or number, or transporter, or other such change of condition.         Separate Forms C-104 must be filled for each need in condition.		
Charles       Comparison         Area Engineer       (Title)         5-31-85       (Date)    This form is to be filed in compliance with AULE 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 of the secondance with AULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II. III, end VI for changes of owner. well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filled for each need in multiple.	, , ,	
Charles       Comparison         Area Engineer       (Title)         5-31-85       (Date)    This form is to be filed in compliance with AULE 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 of the secondance with AULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II. III, end VI for changes of owner. well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filled for each need in multiple.		DISTRICT 1 SUPERVISOR
(Signolwe)         Area Engineer         (Title)         5-31-85         (Date)    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.    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.    (Date) If this is a request for allowable for a newly drilled or deepened well. If 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 only Sections I. II. III, end VI for changes of owner. well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filled for each need in evidence.	$\rho \circ \rho$	The second secon
(Signolwe)         Area Engineer         (Title)         5-31-85         (Date)    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.    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.    (Date) If this is a request for allowable for a newly drilled or deepened well. If 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 only Sections I. II. III, end VI for changes of owner. well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filled for each need in evidence.	$(Y(1)) \downarrow \downarrow$	This form is to be filed in compliance with suit F tree
Area Engineer (Title) 5-31-85 (Date) (Date) Area Engineer (Title) 5-31-85 (Date) (Date) Area Engineer (Title) 5-31-85 (Date) (Date) Area Engineer (Title) 5-31-85 (Date) (Date) Area Engineer (Title) (Title) (Date) (	- n.d. I me	If this is a request for allowable for a popular data
Area Engineer (Title) 5-31-85 (Date) All sections of this form must be filled out completely for allow- sble 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 filled for each need in publicity	(Signature)	
5-31-85 (Date) Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such changes of condition. Separate Forms C-104 must be filed for each need in multiple		I THE WILL WE WILL BECONDENCE WILL RULE 111.
5-31-85 (Date) Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such changes of condition. Separate Forms C-104 must be filed for each need in multiple	(Title)	All sections of this form must be filled out completely for allow-
(Date) (	5-31-85	and the second s
Separate Forms C-104 must be filed for each pool in multiple		II FILL OUL DRLY Sections I II III and MY for all
Joppsrate rorms C-104 must be filed for each pool in multiply comoleted wells.		I the set in a set of the set of the set of the set of condition
	Stern and State	completed wells.
		the second s

·- · .

-----

. **:** .