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If well produces oil or liquids, give location of tanks.	Leese Name Elliott B-6 Location Unit Letter P;; Line of Section 6 II. DESIGNATION OF The Name of Authorized Transporter Name of Authorized Transporter	<u>rownship</u> 22S <u>RANSPORTER OF</u> er of Casinghead Gas	OIL AND NATURA	Ine and <u>660</u> <u>37E</u> , NMPM L GAS Address (Give address Address (Give address	Lea be which approved copy of so which approved copy of	f this form is to be t	ient)

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.

Land Cuffe		
0	(Signature) Services Supv.	
	(Tille) 5–24,88	· · · · · · · · · · · · · · · · · · ·
	(Date)	

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BY	ODICINAL CICARD DV IDODA OTTO
	ORIGINAL SIGNED BY JERNY SEXTON
	DISTRICT I SUPERVISOR
TITLE	PIOTRIOT I JOI ERVIJOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepener 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 allow-able 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.

Station of the Device