District I PO Box 1980, 1 District II 811 South Firs District III 1000 Rio Braze District IV 2040 South Paul I	t, Artesia,) 16 Rd., Azte checo, Santi	NM 58210 x, NM 57410 x Fe, NM 575	05	State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505 FOR ALLOWABLE AND AUTHORIZAT						Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies			
I.		CEQUES	Operator na	LLOWABI		ND AU	THOR	IZAT	ION TO TI	ANSP			
	Collins & Ware, Inc.								6	0048			
				all, Suite Texas 79		0		(,		Reason for	Filing Code		
<u> </u>	API Numbe							-	CO E	ffecti	ve 11/01/96		
30 - 0 25-		r		Bline		Pool Nama Jil & (e Gas (Pi	ro Ga	s)		* Pool Code 72480		
	roperty Cod	e			' P	roperty Na	me		····		' Well Number		
192		<u> </u>			ood,	Eugene	•				5		
II. 10 Ul or lot no.	Surface	Locatio		Lot.Idn	Feet from		North/So		Feet from the				
в	22	225	37E		589		Nort		2051	East/Wes			
11		Hole Lo		I			l						
UL or lot no.		Township		Lot Idn	Feet from	n the	North/So	uth line	Feet from the	East/Wes	t line County		
		·											
¹² Lse Code	¹³ Produc	F F	Code ¹⁴ Gas	Connection Date	"C	-129 Permi	it Number		C-129 Effective	Date	" C-129 Expiration Date		
	nd Gas	Transpo			<u> </u>								
" Transpo	rter		" Transporter	Name		* PO		21 O/G			TR Location		
020667			and Addre							and De	cription		
020007		ell Pip 4 W. "C				0011510 0			Unit H, Sec. 22, T22S, R37E Wood Battery				
generalise en appendig Million de la composition de la composition Million de la composition de la composition de la composition de la	2 Sec. 12	bbs, NM			X				wood Battery				
009171			prporation			807129 G Un			Unit B,	Unit B, Sec.22, T22S, R37E			
an a		44 Penb <u>essa</u> T					G			GPM Gas Meter			
IV. Produced Water													
	POD						STR Locati						
00115 V. Well (tion Data	t H, Sec	. 22, T229	S, R3	7E. W	ater t	rucke	ed to disp	osal fi	rom Battery.		
V. WEII		_	A Ready Date		" TD	<u> </u>	* PBT		" Perfora				
			,							tions	» DHC, DC,MC		
	³⁴ Hole Size		²² Casing & Tubing Size			³³ Depth Set			k		³⁴ Sacks Cement		
	<u> </u>												
				····									
VI. Well	Terr		<u> </u>										
VI. WEII ³⁸ Date N	Test Da		Delivery Date	³⁷ Test I	Dat-				1				
			,	1941		³⁸ Test Length		<u>gth</u>	" Tbg. Pressure		" Cag. Pressure		
" Choke			^u Oil	4' Wat		" Ges			4 AOF		" Test Method		
knowledge and l	^o I hereby certify that the rules of the Oil Conservation Division have been compli- with and that the information given above is true and complete to the best of my knowledge and belief.					OIL CONSERVATION DIVISION							
Signature: Juin Sunda				mth		Approved	by:		s. 1 19 2 211	N 67 9 55	XTON		
Title	Printed name: Dianne Sumrall					Title:				î			
Pro		n Super				Approval	Date:		n	FC 03	1006		
Dale: 11/2			Phone: (9	15)687-343	5				11				
	ments of ob	antor fill in t	ae OGRID num	aber and name of	the prev	ious operat	or						
	Previous (perator Sign	sture	·		Printed	I Name			Title	Date		

District I PO Box 1980, 1	Hobbs, NM \$	8241-1980	i	Stat Energy, Miner	e of Nev	w Mex	iCO IS Departs	esi	Rev	Form C-104 Revised February 10, 1994			
District II PO Drawer DD District III	PO Drawer DD, Artania, NM #211-0719 OIL CONSERVA					TION DIVISION Submit to Appropriate					structions on back ate District Office 5 Copies		
1000 Rio Brazos District IV	e Rd., Aztec,	NM 87410			Fe, NM		-2088						
PO Box 2008, S I.			-			ID AU	THOR	IZAT	ION TO TRANSPORT				
		Col	•	ne and Addres						' ogru 04874	D Numb	4	
			lins & W W. Wall						ļ	Remos fo	e Filine	Code	
			land, Te						CO Effec		_		
•••	PI Number			<u> </u>	4	Pool Name	t		1		4	Pool Code	
30 - 025-				Bli	nebry (ro G	as)	77	2480		
19216	roperty Code					eperty Na Euger					' W	'ell Number 5	
II. ¹⁰	Surface	Location	<u></u>							l	<u> </u>		
U er lot se.	Section	Towaship	Range	Loi.lda	Feet from	Lhe	North/So			EAN/W	est line	Coesty	
В	22	225	37E		589		No	rth	2051	Eas	st	Lea	
	· · · · · · · · · · · · · · · · · · ·	Hole Loo						· ···	· · · · · · · · · · · · · · · · · · ·				
UL or lot no.	Section	Township	Range	Lot Ida	Feet from	a the	North/S	outh Loc	Feet from the	F.ast/We	nt Los	Cousty	
" Lae Code P	¹³ Product	ng Method Co :	ide ¹⁴ Gas (Connection Da	Le ^{Le} C-	129 Permi	it Number	'	* C-129 Effective	Date	"C-129 Expiration Date		
III. Oil a													
"Transpo OGRID		••	Transporter N and Address			^µ PO	D	" O/G		# POD UL and D	STR Lo escriptio		
138648		oco (Tru			00	11510		0	Unit H Se	c. 22,	, T22	S, R37E,	
	STATE I AN		t Avenue Texas			Battery							
009171			rporatio		280	07129 G Unit B, Sec. 22, T22S, R37E,							
	404	44 Penbr	ook			GPM Gas Meter							
	<u></u>	essa, Te	xas 797	762									
Service Service and the	a a anta												
And the second s	nanchus	<u></u>									 		
Service Storage Storage						An arrest a start a / start and							
Martenation	1 1 1 1									· ·			
	uced Wa						CTP I and	l	Description				
0011		Unit	H Sec.	22, т22	S, R376	E. Wa	ter t	rucke	d to disp	osal fi	rom E	Battery.	
V. Well	Complet	ion Data					· · · · · · · · · · · · · · · · · · ·		····				
	ud Date		" Ready Dale			" TD			" PBTD			Perforations	
<u> </u>	¹⁴ Llole Size		" C	asing & Tuble	ng Size	¹⁰ Depth Set				³⁶ Sacks Cement			
					······	_		· · -					
			<u> </u>	······	<u></u>						****		
			<u>+</u>										
VI. Well	Test Da	ita	<u>_l</u>				<u> </u>		l				
Dale ?	New Oil	^M Gas D	elivery Date	H Te	mt Date	" Test Longth			* Tog. 1	ressure	1	¹⁴ Cag. Pressure	
" Chok	" Choke Size " Oil " Water				Water	-	4 G M		×	OF		" Test Method	
" I hereby cert	ify that the ru	les of the Oil	Conservation D	ivision have be	en complied	_				<u></u>			
knowledge and		a tined above i	a true and comp	nele to the best	of my		OI		NSERVAT				
Signature:	Signature:						d by:	OR	GINAL-SIGN	169 RY J	ERRY	SEXTON	
Printed name:									DISTRIC	I SUPER	VISO	t	
Tide: F	Product	ion Supe	rvisor			Approva	Date:		SEP	25 19	9ô		
	19/96			15) 687-						N			
" If this is a	change of ope	rator fill ia ti	e OGRID aut	nber and name	e of the prev	lous opers	lur						
	Previous (Operator Sign	alure	· · ·		Priste	d Name			Ti	le	Date	

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District I PO Box 1980, Hobbs District II 811 S. 1st Street, Art District III 1000 Rio Brazos Rd. District IV PO Box 2088, Santa	State of New Mexico Ene Minerals & Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, NM 87504-2088					Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies							
I.	R	EQUES	Γ FOR A	LLOW	ABLE	E AND AL	UTHOF	RIZAT	ION TO TR				
Collins & Wa 508 W. Wall,	Suite	1200	rator name an	d Address			² OGRID Number 004874 ³ Reason for Filing Code						
Midland, Tex	(as 7970) PI Number	<u> </u>	<u> </u>			5 Pool Na	me		у сн	Effective	7-1-96 Pool Code		
30-0	25 - 10420 erty Code				Bl		1 & Gas	(PR	lo Gas)	7	72480 - 06660 • Well Number		
	1216					Wood, Eu	gene				5		
	Surface	Location					·r			1			
UL or lot no.	Section	Township	Range	Lot. Idn	Fee	et from the	North/So		Feet from the	East/West lin			
B 11 -	22 Bottom	22S Hole Lo	<u>37E</u>	<u>I</u>		589	Nor	rtn	2051	East	Lea		
UL or lot no.	Section	Township	Range	Lot. Idn	Fe	et from the	North/So	uth Line	Feet from the	East/West lin	e County		
¹² Lse Code P	¹³ Producir	ng Method Co F	ode ¹⁴ Gas (Connection 1	Date	¹⁵ C-129 Per	mit Numbe	r ¹	⁶ C-129 Effective	Date ¹⁷ (C-129 Expiration Date		
III. Oil and	d Gas T	ransport	ers										
18 Transporter OGRID			nsporter Nan nd Address	ie		20 POD		21 O/G	22 POD ULSTR Location and Description				
020445	333		mian Corporation Suite 2900 cas 77002			0011510 0		Unit H, Sec. 22, T22S, R37E. Battery.					
009171	GPM	Gas Corp	oration							nit B, Sec. 22, T22S, R37E. PM Gas Meter.			
	****	4 Penbroo ssa, Texa											
		<u> </u>								· · · · · · · · · · · · · · · · · · ·			
IV. Produc	ced Wat	er				24 POD ULS	TR Locatio	on and De	scription				
00115	50	Unit H,	Sec. 22,	T22S, F	R37E.	Water tru	ucked to) dispo	sal from Bat	tery.			
V. Well C		on Data				27 000	1		28				
²⁵ Spud D	ate	20	Ready Date			²⁷ TD			²⁸ PBTD	29	Perforations		
³⁰ Ho	ole Sie		³¹ Casir	ig & Tubing	, Size	³² Depth Set				s Cement			
	<u></u>		<u></u>					· · · · ·					
VI. Well T	est Data	<u> </u>											
³⁴ Date New		35 Gas Delive	ery Date	³⁶ Test	t Date	³⁷ Test Length			³⁸ Tbg. Pressure ³⁹ Csg. Pressure				
⁴⁰ Choke Size ⁴¹ Oil ⁴² Water					⁴³ Gas ⁴⁴ AOF ⁴⁵ Test Method								
⁴⁶ I hereby certify that the rules 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. Signature:						OIL CONSERVATION DIVISION Approved by: USE DIVISION Second CONTRY SEXTON							
Printed name: James E. Or:	seth					Title:							
Title: Vice Preside							Date:			JUL 19	1996		
Date:	Date: 6/24/96 Phone: 915-687-3435												
	47 If this is a change of operator fill in the OGRID number and name of the previous operator Amerada Hess Corporation (000495) Previous Operator Signature Printed Name Title Date												
	- Ju	¥‡			J.W.	Pitzer	Dist	trict	Superinten	dent 🦯	e/30/96		

AMEN	IS AN AMENDED REPORT, CHECK THE BOX LA DED REPORT AT THE TOP OF THIS DOCUMENT	ABLED 22	 The ULSTR location of this POD if it is different from the well completion location and a short description of the PO (Example: "Battery A", "Jones CPD", etc.)
Report	all gas volumes at 15.025 PSIA at 60°. all oil volumes to the nearset whole barrel.	23	The POD number of the storage from which water is more
accoult	ist for allowable for a newly drilled or despaned well mi ranied by a tabulation of the devistion tests conduc moe with Rule 111.	uat be ted in	from this property. If this is a new well or recompletion a this POD has no number the district office will assign number and write it here.
new an	ione of this form must be filled out for allowable reque d recompleted wells.		 The ULSTR location of this POD if it is different from t well completion location and a short description of the PO (Example: "Battery A Water Tank", "Jones CPD Wat Tank", etc.)
cnange	only sections I, II, III, IV, and the operator certificatio s of operator, property name, well number, transport uch changes.	ne for ier, or 25	
А вера	rate C-104 must be filed for each pool in a m	ultiple 26	. MO/DA/YR this completion was ready to produce
compie	uon.	27	Total vertical depth of the well
operato	erly filled out or incomplete forms may be return re unapproved.		
1.	Operator's name and address	29	 Top and bottom perforation in this completion or cas shoe and TD if openhole
2.	Operator's OGRID number. If you do not have one be assigned and filled in by the District office.	it will 30	. Inside dismeter of the well bore
3.	Reason for filing code from the following table: NW New Wall	31	
	RC Recompletion CH Change of Operator	32	 Depth of casing and tubing. If a casing liner show top a bottom.
	AO Add oil/condensate transporter CO Change oil/condensate transporter	33	. Number of sacks of coment used per casing string
	AG Add gas transporter CG Change gas transporter		s following test dats is for an oil well it must be from a to inducted only after the total volume of load oil is recovered.
	RT Request for test allowable (include y requested)	0101110	
4.	If for any other reason write that reason in this box. The API number of this well	35	·
5.	The name of the pool for this completion	36	
6.	The pool code for this pool	37	. Length in hours of the test
7.	The property code for this completion	38	. Flowing tubing pressure - cil wells Shut-in tubing pressure - gas wells
8.	The property name (wall name) for this completion	39	
9.	The well number for this completion	(0)	Shut-in casing pressure - gas wells
10.	The surface location of this completion NOTE: United States government survey designates a Lot No	imhae At	
	for this location use that number in the 'UL or lot no. Otherwise use the OCD unit latter.	'box. 42	
11.	The bottom hole location of this completion	43	
12.	Lease code from the following table:	44	•
	S State P Fee	45	. The method used to test the well: F Flowing
	J Jicarilla N Navajo U Uta Mountain Uta		P Pumping S Swabbing
	U Uta Mountain Uta I Other Indian Triba		If other method please write it in.
13.	The producing method code from the following table F Flowing P Pumping or other artificial lift	46	The signature, printed name, and title of the pers authorized to make this report, the date this report w signed, and the telephone number to call for questic about this report
14.	MO/DA/YR that this completion was first connected gas transporter	d to a 47	
15.	The permit number from the District approved C-12 this completion	29 for	and title of the previous operator's representat authorized to verify that the previous operator no lon operates this completion, and the date this report w signed by that person
16.	MO/DA/YR of the C-129 approval for this completio	n	
17.	MO/DA/YR of the expiration of C-129 approval fo complation	er this	
18.	The gas or oil transporter's OGRID number		_
19.	Name and address of the transporter of the product		RECEN-
20.	The number assigned to the POD from which this pr will be transported by this transporter. If this is a new or recompletion and this POD has no number the d office will assign a number and write it here.		RECEIVED
21.	Product code from the following table:		U AN 2 5 1535 -
	O Oil G Gas	 30.	OFF HOBBS
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	and a second	الحجوبية يوني الداريون	د در در میرود. این میروند از میروند و میروند از میروند از میروند از میروند از میروند از میروند از میروند و میروند و میروند از
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District [PO Box 1940, Hobbs, NM 85241-1986 District II	State of New Mexic					:nt		Revie	sed Februa	Form C-104 ry 10, 1994	
NO Drawer DD, Artenia, NM \$5211-0719 District III 1909 Ris Brazos Rd., Aztec, NM \$7410	0	IL CONS	PO Bo	c 2088		NC	Instructions on back Submit to Appropriate District Office 5 Copies				
District IV		Santa	Fe, NM	87504	1-2088			[]	AMENINE	D REPORT	
PO Box 2088, Santa Fe, NM 87504-2088 I. REQUES	FOR A	LLOWAI	BLE AN	ND AU	THOR	ZAT	ION TO TR			DREPORT	
AMERADA HESS CORPO	Operator and	me and Addres	4					' OGRID !			
DRAWER D							000	495 Resson for I	Filing Code		
MONUMENT, NM 88265											
' API Number 30 - 025-10420	·····		1	Pool Nam	t.			ie			
Property Code	BLINE	<u>BRY</u>	1.0		an a		··	0	6660		
000231	E. WO(חר	'n	roperty Na	73) C				' Well Num	ber	
II. ¹⁰ Surface Location			an a						5		
Ul or lot no. Section Township	Range	Lot.Idn	Feet from	a the	North/Sou	th Line	Feet from the	East/West	line	County	
B 22 22S	37E		589	<u>~~</u>	NORT	H	2051	EAST		LEA	
UL or lot no. Section Township	Range	Lot Idn	Feet from	n ihe	North/So	uth line	Feet from the	East/West	line	County	
" Lae Code " Producing Method C	odel ^H Car	Connection Da					a Marija di kata da kat				
P F		Contection Da		-129 Perm	it Number	1	C-129 Effective E)ate	" C-129 Eapi	iration Date	
III. Oil and Gas Transport	Transporter M					• • • • • • • • • • • • • • • • • • •		*			
OGRID	and Addres	6		^u PO	D	²¹ O/G	. 1	POD ULST	R Location		
009171 GPM GAS C 4004 PENB	ORPORATI ROOK	ON	2	80712	9	G	GPM GAS SALES METER LOCATED				
ODESSA, T		762		IN UNIT B, SEC. 22, T-22S R-37E.						225,	
		·									
IV. Produced Water											
" POD				POD UL	STR Location	a and D	ecciption				
V. Well Completion Data									a na tanàna dia kaominina d		
¹¹ Spud Date	²⁴ Ready Da	ite	1769 - 1669 <u>- 8</u> 78 - 879 - 779	י דס			≠ PBTD		" Perform	tions	
							:				
M Hole Size	^{ⁿ C}	asing & Tubin	ng Size		1 ²¹	epth Set	" Steks Cement			it	
	†	ann an shifte the first of the second						· · · · · · · · · · · · · · · · · · ·			
VI. Well Test Data		, ,		k	Name and Trajets in the		l_				
	clivery Date	[™] Te	al Date		" Test Leng	" Test Length		ssure	³⁰ Cag. Pressure		
" Choke Size 4	Oil ^a Water		Valer	^e Gas			" AOF " Test		Method		
" I hereby certify that the rules of the Oil with and that the information given above : knowledge and belief Signature:			. COI	I NSERVATI	ON DIV	/ISION					
Printed name:		i by: <u>RICINIA1</u>	SIGNE	D BY JERRY (CYTON.						
R.L. WHEELER,			بددية) XICI	I SUPERVISOR	l					
ADMIN. SVC. COO				Approval	Date:	<u>AN 2</u>	7 1995				
Date: <u>1-19-95</u> ⁴ If this is a change of operator fill is the	Phone: (5(e OGRID num)5) 393-1	2144		in the second						
			- ar pren	wes operat	uf						
Previous Operator Sign	Priste	i Name			Title		Dete				

	Mew Mexico Oi Co	opervation (Division
		tructions	
IF THIS	IS AN AMENDED REPORT, CHECK THE BOX LABLED ED REPORT AT THE TOP OF THIS DOCUMENT	2 2 .	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", sto.)
Report a	il gas volumes at 15.025 PSIA at 60°. Il oil volumes to the nearest whole barrel.	23.	The POD number of the storage from which water is moved
accompa	t for allowable for a newly drilled or despaned well must be nied by a tabulation of the deviation tests conducted in new with Rule 111.		from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
All section new and	ne of this form must be filled out for allowable requests on recompleted wells.	24.	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", "Jones CPD Water
changes	nly sections I, II, III, IV, and the operator certifications for of operator, property name, well number, transporter, or ch changes,	25.	Tank*,etc.) MO/DA/YR drilling commenced
	•	26.	MO/DA/YR this completion was ready to produce
completi	ate C-104 must be filed for each pool in a multiple on.	27.	Total vertical depth of the well
Improper	ly filled out or incomplete forms may be returned to	28.	Plugback vertical depth
1.	Operator's name and address	29.	Top and bottom perforation in this completion or casing shoe and TD if openhole
2.	Operator's OGRID number. If you do not have one it will	30.	Inside diameter of the well bore
3.	be assigned and filled in by the District office. Reason for filing code from the following table:	31.	Outside diameter of the casing and tubing
0.	NW New Weil RC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing liner show top and bottom.
	AO Add oil/condensate transporter	33.	Number of sacks of cement used per casing string
	CO Change oil/condansate transporter AG Add gas transporter CG Change gas transporter RT Request for tast allowable (Include volume		llowing test data is for an oil well it must be from a test ted only after the total volume of load oil is recovered.
	If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produced
4.	The API number of this well	35.	MO/DA/YR that gas was first produced into a pipeline
- . 5.	The name of the pool for this completion	36.	MO/DA/YR that the following test was completed
6.	The pool code for this pool	37.	Length in hours of the test
ð. 7.	The property code for this completion	38.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
8. 9.	The property name (well name) for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
	The well number for this completion	40.	Diameter of the choke used in the test
10.	The surface location of this completion NOTE: if the United States government survey designates a Lot Number	41.	Barrels of oil produced during the test
	for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	42.	Barrels of water produced during the test
11.	The bottom hole location of this completion	43.	MCF of gas produced during the test
12.	Lease code from the following table:	44.	Gas well calculated absolute open flow in MCF/D
	F Federal S State	45.	The method used to test the well:
	P Fee J Jicarilla		F Flowing P Pumping
	N Navajo U Ute Mountain Ute		S Swabbing If other method please write it in.
13.	I Other Indian Tribe The producing method code from the following table: F Flowing P Pumping or other artificial lift	46.	The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
14.	MO/DA/YR that this completion was first connected to a gas transporter	47.	The previous operator's name, the signature, printed name, and title of the previous operator's representative
15.	The permit number from the District approved C-129 for this completion	• .	authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person
16.	MO/DA/YR of the C-129 approval for this completion		
17.	MO/DA/YR of the expiration of C-129 approval for this completion		
18.	The gas or oil transporter's OGRID number		
19.	Name and address of the transporter of the product	··-	RECEIVES

The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.

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Product code from the following table: O Oil G Gas 21.

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