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of Authorized Transporter of Casinghead Gas X or Dry Gas DRICHARDSON CARBON & GASOLINEZ CO.				Gas] Address (Give address to which approved copy of this form lst City Bank Tower, 201 Main, Ft					4)	
f well produces oil or liquids, Unit Sec. Twp. Rgs ive location of tanks.						L Is gas actually connected? When ?					
ingled with that f	from any ot	her lease or	pool, giv	/e comming		ber:					
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1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

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