STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
BANTA FE			
FILE			
U.8.0.8.			
LAND OFFICE			
TRANSPORTER	OIL		_
	GAS		
OPERATOR			
PROBATION OFFICE		1	1

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 05-01-83 Page 1

REQUEST FOR ALLOWABLE

Construct Texaco Producing Inc. AUTHORIZATION TO TRANSPORT CIL AND NATURAL CAS Presented Producing Inc. Authorization for transporter of: Discrete	AND			
Comment TPNACO Producing Inc. Address TPNACO Producing Inc. Address TPNACO Producing Inc. Address TPNACO Producing Inc. TPNACO Producing Inc. TPNACO Producing	AND AND AND AND AND AND AND AND			
TEXACO Producing Inc. Address Address Pr. O. Box 728, Hobbs, New Mexico 88240 Research for the very life in the producing form of	AUTHORIZATION TO TRANSPO			
TEXACO Producing Inc. Address Address Pr. O. Box 728, Hobbs, New Mexico 88240 Research for the very life in the producing form of	Chertifol			
Recently lot hing (Seet proper box) New Veril New Veril New Veril New Wern Oil Recently lot hing (Seet proper box) Change in Transporter oil Oil Recently lot hing (Seet proper box) Change of Operator from Getty to TEARCO Producing Inc. 12/31/84 Tearco Producing Inc. 12/31				
Resembly for filing (Area proper bas) Resembly for filing (Area proper bas)	Ladran			
Reconcil to filing (Creek propert box) Description	P. O. Box 728, Hobbs, New Mexico 88240			
Recomplation Recomplation	Regardis) for filing (Check proper box)	Change of Operator from Getty to		
Recomplisation Catinghood Gos Candensate Change of ownership give name address of previous owner Change of ownership give name address of previous owner Change of ownership give name Change of previous owner Change of previous owner	Change in Transporter of:	1 may 200 Parading Ing 12/31/84		
Change in Ownership give name and address of previous owner. If change of ownership give name and address of previous owner. If DESCRIPTION OF WEIL AND LEASE Level home A.B. Coates "C" 16 Justis Blittle Country of the control of the country	Bacomiation Oil Dry			
If change of ownership give name address of previous owner. II. DESCRIPTION OF WELL AND LEASE Least Norm A.B. Coates "C" 16 Justis Blitting Driving State, Facered or Facere		densate		
II. DESCRIPTION OF WELL AND LEASE Lesse home A.B. Coates "C" 16 Justis Blitter Description Unit Letter O 760 Feet From The South Line and 2030 Feet From The Least Line of Section Viii DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Norme of Authorized Transporter of Oil O of Connectable P.O. Box 2528, Hobbs, N.M. 88240 Texas N.M. Pipeline Co. (0055-1239) Feet From The Design Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 88240 Norme of Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 Home of Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 Home of Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 Norme of Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 Home of Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 Home of Authorized Transporter of Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 Feet From The Description of Interest Coangeled Gar Connectable P.O. Box 2528, Hobbs, N.M. 89240 P.O. Box 2528,				
IL DESCRIPTION OF WEIL AND LEASE Lease home A.B. Coates "C" 16 Justis Blindard Drinkard Notes and the property of the prope	If change of ownership give name			
Location Location Line of Section Lin	and address of previous own.			
Location Location Line of Section Lin	II. DESCRIPTION OF WELL AND LEASE	mation Kina of Lease		
Unit Letter O . 760 Feet From The South Line and 2030 Feet From The East Line of Section 24 Township 25S Roage 37E NMPM, Loa Cour. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Rease of Authorized Transporter of Oil 20 of Concensate P.O. Pox 2523, Hobbs, N.M. 8240 Texas N.M. Pipeline Co. (0055-1239) P.O. Pox 2523, Hobbs, N.M. 88240 Texas N.M. Pipeline Co. (0055-1239) P.O. Pox 2523, Hobbs, N.M. 88240 III. well produce a cit of Italia. Sec. Typ. Res. Is gas actually cornected? Indian Approve copy of this form is to be tent? P.O. Box 1492, El Paso, Tx 79978 If this production is commingled with that from any other lesse or pool, give commingling order number: P-1330A NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPILANCE Interb certify that the rules and regulations of the Oil Conservation Division have been completed with and that the information given is rise and complete to the best of my knowledge and being. District Operations Milager April 24, 1985 (East) (East) District Operations Milager (Filling Interpretation of the Section Sections I. II. III. and VI for changes of condense with next All sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled	Lease Name	Drinkard State, Federal or Fee FED LC032650 (b)		
This produces of or liquids. Continues	A.B. Coates "C"			
This produces of or liquids. Continues	Location South	2030 Feet From The East		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorised Transporter of Oil Co. (0055-1239) Address (Give codiess to which approved copy of this form is to be sent) Name of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Name of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 Nome of Authorised Transporter of Cosinghead Gas O P.O. Box. 2523, Hobbs, N.M. 88240 P.O. Box. 2523, Hobbs, N.M. 88	Unit Letter O - 760 Feet From The Dodds Line	dug		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Note of Authorized Transporter of City of Concentents Texas N.M. Pipeline Co. (0055-1239) None of Authorized Transporter of Cosingness Gas or Dry Gas D. P.O. Box 2528, Hobbs, N.M. 88240 Texas N.M. Pipeline Co. (0055-1239) None of Authorized Transporter of Cosingness Gas D. or Dry Gas D. P.O. Box 2528, Hobbs, N.M. 88240 Texas N.M. Pipeline Co. (0055-1239) None of Authorized Transporter of Cosingness Gas D. Or Dry Gas D. P.O. Box 2528, Hobbs, N.M. 88240 Texas N.M. Pipeline Co. (0055-1239) None of Authorized Transporter of Cosingness Gas D. P.O. Box 2528, Hobbs, N.M. 88240 P.O. Box 2528, Hobbs, N.M. 88240 P.O. Box 1492, El Paso, Tx 79978 It well produces off or liquids. B + 24 + 25S - 37E Yes Is que commingling order number: P-1330A NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE Interby 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 beinef. Signature) Direction Operations Manager (Signature) Direction Operations Manager April 24, 1985 (Ditter) Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, N.M. 88240 P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 It peace to which approved copy of this form is t	24 25S Bange	37E , NMPM, Lea Cour		
Note: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE Interest completed with and that the information given is true and complete to the best of my knowledge and beitef. District Operations (Signature) April 24, 1985 N.M. 98240 P.O. Box 2528, Hobbs, N.M. 88240 P.O. Box 1492, El Paso, Tx 79978 Logar converse to which approve copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse to which approve copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 799	Line of Section 24 Township 230			
Note: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE Interest completed with and that the information given is true and complete to the best of my knowledge and beitef. District Operations (Signature) April 24, 1985 N.M. 98240 P.O. Box 2528, Hobbs, N.M. 88240 P.O. Box 1492, El Paso, Tx 79978 Logar converse to which approve copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse to which approve copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 Logar converse converse copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 799		GAS of this form is to be sent)		
Texas N.M. Pipeline Co. (0055-1239) Nome of Authorized Transporter of Cosinghead Gas (in or Dry Gas (in the orders to which approved copy of this form is to be sent) Nome of Authorized Transporter of Cosinghead Gas (in or Dry Gas (in the orders to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Tx 79978 If well produces oil or liquids. B 24 25S 37E Yes 1959 If well production is commingled with that from any other lease or pool, give commingling order number: P-1330A If this production is commingled with that from any other lease or pool, give commingling order number: P-1330A NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPHANCE Increby certify that the rules and regulations of the Oil Conservation Division have been complied with and that information given is true and complete to the best of my knowledge and belief. DISTRICT I SUFERVISOR This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despite the form must be accompanied by a tabulation of the devise taken on the well in accordance with RULE 1104. All sections of this form must be accordance with RULE 1114. Abortle 24, 1985 (Core) Read the order and recompletely for allowable for a newly drilled or despite the filed out completely for all own and recompletely for all own and recompletel	III. DESIGNATION OF TRANSPORTER OF OR Condensate of Conden	Address (Give address to which approved copy of this form to		
Nome of Authorized Transporter of Cosinghedo Gas or Dry Gas P.O. Box 1492, El Paso, Tx 79978 El Paso Natural Gas Co. If well produces off or liquids, B 24 25S 37E Yes 1959 If this production is commingled with that from any other lease or pool, give commingling order number: P-1330A NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE Increby 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 Operations Manager April 24, 1985 (Signature) District Operations Manager (Title) April 24, 1985 (Date)	I make N M. Directine Co. $\{0055-1239\}$	P.O. Box 2528, Hobbs, N.M. 88240		
El Paso Natural Gas Co. If well produces oil or liquide, and that it is a production of torks. If this production is commingled 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 completed with and that the information given is true and complete to the best of my knowledge and belief. District Operations Manner (Signature) District Operations Manner (Title) April 24, 1985 (Date) (Date) Link is a request for allowable for a newly drilled or deep the self-of the device taken on the well in accordance with Rule 111. All sections of this form must be filled out completely for all self-on new and recompleted wells. Fill out only Sections 1. II. III. and VI for changes of own well name or number, or transporter, or other such changes of conditions are not the self-of the form contents of the filled for each pool in multiple for each poo	TEXAS N.M. TIPETING COstinghed Gas (A) or Dry Gas	Address (Give address to which approved top) of the		
If well produces oil or liquids. B 24 25S 37E Yes 1959 If this production is commingled 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 Increby 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 Operations Manager (Signature) District Operations Manager (Title) April 24, 1985 (Date) Ves 1959 OIL CONSERVATION DIVISION APPROVED APPROVED APPROVED APPROVED APPROVED DISTRICT 1 SUFERVISOR This form is to be filled in compliance with RULE 1104. If this is a recuest for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devise taken on the well in accompanie with RULE 111. All sections of this form must be filled out completely for all selections of this form must be filled out completely for all selections of this form must be filled out completely for all selections of this form must be filled out completely for all sections of this form must be filled for each pool in multiple or deep or more or number. (Date)	RI Paso Natural Gas Co.	P.O. Box 1492, El Paso, 1x 79978		
If this production is commingled 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. District Operations Manager (Signature) District Operations Manager (Title) April 24, 1985 (Deser) B 124 258 + 37E 1885 OIL CONSERVATION DIVISION APPROVED APPROVED DISTRICT 1 SUFERVISOR This form is to be filled in compliance with Rule 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devise taken on the well in accordance with Rule 1111. All sections of this form must be filled out completely for all names or numbers, or transporter, or other such changes of owder numbers. Fill out only Sections I. II. III., and VI for changes of owder numbers. Fill out only Sections I. II. III. and VI for changes of owder numbers. Separate Forms C-104 must be filled for each pool in multiple or dear numbers.	Unit Sec. wp. nge.	1959		
If this production is commingled 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. Approved Cistantive) District Operations Manager (Signature) District Operations Manager (Title) April 24, 1985 (Date) OIL CONSERVATION DIVISION APPROVED 6/1, 19 85 This form is to be filled in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or design well, this form must be accompanied by a tabulation of the device taken on the well in accordance with RULE 1111. All sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions in the complete program of the form of the device well name or number, or transporter, or other such change of conditions in the complete program of the form of the device well name or number, or transporter, or other such change of conditions in the complete program of the form of the device well name or number, or transporter, or other such change of conditions in the complete program of the form of the device well name or number, or transporter, or other such change of conditions in the complete program of the form of the device well in the complete program of the form of the device well in the complete program of the device well in the complete program of th		res		
NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE I nereby 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. APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED BY TITLE DISTRICT 1 SUPERVISOR This form is to be filled in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devise taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for all name or number, or transporter, or other such change of conditions of the fill out only Sections I. II. III. and VI for changes of owned in memory or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filled for each pool in multiple conditions.	give location and suith that from any other lease or pool, give commingling order number: R-1330A			
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. APPROVED APPROVED APPROVED APPROVED APPROVED BY BY BY BISTRICT 1 SUFERVISOR This form is to be filled in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviations taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all name or number, or transporter, or other such change of conditions are represented by a tabulation of the deviations of this form must be filled out completely for all name or number, or transporter, or other such change of conditions are represented by a tabulation of the deviations of this form must be filled out completely for all name or number, or transporter, or other such change of conditions are represented by a tabulation of the deviations of this form must be filled out completely for all name or number, or transporter, or tra	If this production is comminged with that from any			
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. APPROVED APPROVED APPROVED APPROVED APPROVED BY BY BY BISTRICT 1 SUFERVISOR This form is to be filled in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviations taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for all sections of this form must be filled out completely for all sections of this form must be filled out completely for all name or number, or transporter, or other such change of conditions are represented by a tabulation of the deviations of this form must be filled out completely for all name or number, or transporter, or other such change of conditions are represented by a tabulation of the deviations of this form must be filled out completely for all name or number, or transporter, or other such change of conditions are represented by a tabulation of the deviations of this form must be filled out completely for all name or number, or transporter, or tra	NOTE: Complete Parts IV and V on reverse side if necessary.	II DOMOGRANATION DIVICION		
Approved W. B. Williams and the information given is true and complete to the best of my knowledge and belief. District Operations Manager April 24, 1985 (Dete) Approved Approved BY District Operations Manager (Dete) Approved Approved BY District Operations Manager (Dete) Approved BY District I Surenvisor BY District Operations Manager All sections of this form must be accompanied by a tabulation of the deviation on the well in accompanied with multiplication of the deviation on the well in accompanied wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions in the must be filled for each pool in multiplication of the must be filled for each pool in multiplication.				
District Operations Manager April 24, 1985 (Date) District form Sections I. II. III. and VI for changes of owwell name or number, or transporter, or other such change of condi- well name or number, or transporter, or other such change of condi- Separate Forms C-104 must be filled for each pool in mui		6/1, 19 85		
been complied with and that the information greates my knowledge and belief. DISTRICT I SUPERVISOR This form is to be filled in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devia taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for all on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filled for each pool in multiple management of the filled for each pool in multiple management of the filled for each pool in multiple management of the filled for each pool in multiple my filled	I hereby certify that the rules and regulations of the Oil Conservation Division have	Arrivo 45		
TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devise taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other auch change of conditions. Separate Forms C-104 must be filled for each pool in multiple completely for all parts.	been complied with and that the importation given is the	BY		
This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviation of the deviation of the deviation of the deviation of the form must be filled out completely for all sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filled for each pool in multiple forms.	my knowledge and belief.			
If this is a request for allowable for a newly drilled or design well, this form must be accompanied by a tabulation of the deviation of this form must be filled out completely for all able on new and recompleted wells. All sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filled for each pool in multiple of conditions.	,	III is in the second of the se		
(Signature) Dintrict Operations Manager (Title) April 24, 1985 (Date) Well, this form must be filled out completely for all sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. H. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filled for each pool in multiple for each pool		If this is a request for silowable for a newly drilled or dee;		
Dictrict Operations Manager All sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. H. III. and VI for changes of ow well name or number, or transporter, or other such change of conditions. (Date) Separate Forms C-104 must be filled for each pool in multiple of the conditions of the sections of this form must be filled out completely for all actions of the sections of th	W.D. Con			
All sections of this form must be filled our completely to the able on new and recompleted wells. April 24, 1985 (Date) All sections of this form must be filled our completely to the able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other auch change of conditions. Separate Forms C-104 must be filled for each pool in multiple filled for	(Signature)	II		
April 24, 1985 April 24, 1985 (Date) able on new and recompleted using Fill out only Sections I. II. III. and VI for changes of own well name or number, or transporter, or other such change of condi-	District Operations Manager	Il and the firm must be filled out completely to.		
(Date) well name or number, or transported for each pool in multiple	(Tule)	able on new and recompleted water.		
Separate Forms C-104 must be filed for each pool in the	April 24, 1985	II it == me or number, or transportation		
completed wells.	(Date)	Separate Forms C-104 must be filed for each pool in min		
		completed wells.		

RECEIVED

MAY 37 1985

HOBBE