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| DISTRIBUTION | | NEW MEXICO CIL | | | รรเด็พ | F | form C+104 | |
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| U.S.G.S. | | | AND | | | | Triacitae (ele: | , |
| LAND OFFICE | _ ^ | AUTHORIZATION TO T | RANSPORT | OIL AND N | IATURAL (| GAS | | |
| 011 | | | | | | | | |
| TRANSPORTER GAS | | | | | | | | |
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| Conoco Ir | ic. | | | | | | | |
| Address | | | | | | | | |
| P.O. Box | 460, Hobb | bs, New Mexico 88 | 3240 | | | | | |
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| I. DESIGNATION OF TRANS | PORTER OF | | GAS | | | | | |
| Name of Authorized Transporter | | or Condensate | | Give address t | | | | |
| Shell Pipeline C Name or Authorized Transporter | orp. | Gas or Dry Gas, T. | <u> 1507</u> | Give address t | Mide | and, | /exas | • |
| Name of Authorized Transporter | of Masinghead | Gas or Dry Gas | Address | l, we address t | o which appro | ved copy of | this form is to | be sent) |
| | Unit | Sec. Twp. Rge. | ! | | 30 '30 | | | |
| If well produces oil or liquids, give location of tanks. | Onit | Sec. Twp. Rge. | .s gas act | ually connecte | d? Wh | en | | |
| | | | | | | | | |
| If this production is commingle. COMPLETION DATA | ed with that f | rom any other lease or poo | ol, give comm | ingling order | number: | | _ | |
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(Signature)

Division Manager

PARTNERS FILE

NMOCD (5)

, 19 -District Supervisor 'nπ£έ_

This form is to be filed 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 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, 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.

JUN2 5 1979