۲.	DISTRIBUTION DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPURATOR PHORATION OFFICE	REQUEST	FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C+104 Superardes Old C-105 and C-110 Effective 1-1-65 GAS			
••	Uperator						
	Doyle Hartm	an					
	Post Office Reason(s) for filing (Check proper box, New Well Recompilation Change in Ownership[X]		Other (Please explain)				
	If change of ownership give name and address of previous owner	Sun Exploration & Product	ion Co. P. O. Box 1861	Midland, TX 79702			
۰۲.	DESCRIPTION OF WELL AND I	LEASE					
	Leose Name Watkins	Well No. Pool Name, Including Fo 2 Jalmat (0il)	Cial Cade	e Leane No.			
Location							
	Unit Letter <u>H</u> ; <u>165</u>	50 Foot From The North Line					
	Line of Section 35 Tow	vnship 24S Range	<u> 36Е , ммрм, Lea</u>	a County			
1.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S TA'd Address (Give address to which appro	ved copy of this form is to be sent)			
			Address (Give address to which appro				
	Nome of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (live address to which appro	yea copy of this form is to be sent?			
	If well produces oil or liquide, give location of tanks.	Unit Sec. Twp. P.ge.	is gas actually connected? Wh	en			
		h that from any other lease or pool,	give commingling order number:				
	COMPLETION DATA	Oli Well Gas Well	Now Well Workover Deepen	Plug Back Same Hes'v. Diit. Res'v.			
	Designate Type of Completio	$n = (\lambda)$ Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
				Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations	<u> </u>		Depth Casing Shoe			
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
			J				
2.		TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)					
	OIL, WEIE. Date First New Oil Run To Tanks	Date of Test	Freducing Mothed (Flow, pump, gas li	jt, etc.j			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Pred, During Tost	Oll-Bbls.	Water-Bble.	Gas+MCF			
	Keredi Pred, Oding Poer						
	GAS WELL						
	Actual Fred. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condenacta			
	Testing Helhod (pitol, back pr.)	Tubing Procesure (Shut-14)	Casing Pressure (Shut-12)	Choke Size			
				TION COMMISSION			
	CERTIFICATE OF COMPLIANC		APPROVED JAN 2 8 1986				
	I hereby certify that the rules and r Commission have been complied w	with and that the information given					
	above is true and complete to the	best of my knowledge and bener.					
			TITLE	compliance with RULE 1104.			
	Jany Q.	Lang Q. Nerr		If this is a request for allowable for a newly dilled or dependent of this form put be accompanied by a tabulation of the deviation			
	(Signa Engineer	(we)	All sections of this form must be filled out completely for allow-				
	(3'0	le)	eble on now and recompleted w	alls. I life and VI for chasses of symmetry			
January 22, 1986 (Date)			Fill out only Sections I. B. 11, and VI for chases of owner, well name or number, or transporter, or other such change of condition-				

DISTRIBUTION		CONSERVATION COL SSION				
JANTA FE		T FOR ALLOWABL. AND	Form C=104 Supersedes Old C=104 and C=1 Effective 1=1=55			
LAND OFFICE	AUTHORIZATION TO TR	AND CANSPORT OIL AND NATURAL GAS				
TRANSPORTER OIL						
OPERATOR						
Derator	2 Production Co					
Sun Exploration & Production Co.						
P. O. BOX 1861, Reason(s) for filing (Check prope	Midland, Texas 79702	Other (Please explain)				
New Well	Change in Transporter of:	- Name Change Or	ly			
Change in Ownership	Oil Dry C Casinghead Gas Cond	From: Sun Oil				
If change of ownership give na and address of previous owner	me					
L. DESCRIPTION OF WELL A	ND LEASE	Formation Kind of Lease				
W Atkins	2 Jalmat Tansi	1 Yates 7 Rvrs. State, Federal cr	Fee Fee			
	1650 Feet From The North	ine and Feet From The	East			
Line of Section 35	Township 24-5 Bange 3	6-E , NMPM, Lea	County			
DESIGNATION OF TRANSP	PORTER OF OIL AND NATURAL G	AS Ta'd	<u> </u>			
Name of Authorized Transporter o	of Cil or Condensate	Address (Give address to which approved o	opy of this form is to be sent;			
Name of Authorized Transporter of	of Casingnead Gas or Dry Gas	Address (Give address to which approved o	copy of this form is to be sent;			
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When				
If this production is commingle . COMPLETION DATA	d with that from any other lease or pool	, give commingling order number:				
Designate Type of Comp	letion - (X)	New Well Workover Deepen Pl	ug Back Same Res'v. Diff. Res'v			
Date Spudded .	Date Compl. Ready to Prod.	Total Depth P.	B.T.D.			
Elevations (DF, RKB, RT, GR, et	c., Name of Producing Formation	Top Cll/Gas Pay Tu	bing Depth			
Perforations		De	pth Casing Shoe			
		D CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
TEST DATA AND REQUES						
OIL WELL Date First New Oil Run To Tanks						
Length of Test	Tubing Pressure	Casing Pressure Ch	oke Size			
Actual Prod. During Test	Oil-Bbis.	Water-Bols. Ga	8-MCF			
I						
GAS WELL Actual Prod. Test-MCF/D	Langth of Teat	Bbls. Condensate/MMCF Gro	rvity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					
			oke Size			
CERTIFICATE OF COMPLIANCE		OIL CONSERVATIO				
	nd regulations of the Oil Conservation	APPROVED				
Commission have been complie	a with and that the information given	BY OHE Strate				
Commission have been complie	the best of my knowledge and belief.	BYCeta Stunding				
Commission have been complie	the best of my knowledge and belief.	TITLE				
Commission have been complie above is true and complete to	the best of my knowledge and belief.	TITLE This form is to be filed in compl If this is a request for allowable	iance with RULE 1104. for a newly drilled or deepened			
Commission have been complie above is true and complete to Defficient complete Acct. Asst. II	the best of my knowledge and belief.	TITLE This form is to be filed in compl If this is a request for allowable well, this form must be accompanied tests taken on the well in accordance	iance with RULE 1104. for a newly drilled or deepened by a tabulation of the deviation with RULE 111.			
Commission have been complie above is true and complete to Defficient complete Acct. Asst. II	the best of my knowledge and belief.	TITLE This form is to be filed in compl If this is a request for allowable well, this form must be accompanied	iance with RULE 1104. for a newly drilled or deepened by a tabulation of the deviation with RULE 111. filled out completely for allow-			

ANTAFE		CONSERVATION COMM	Form C+i34	
	<1	TROR ALLORABLE AND	04=++++ (ta 0+) + and 0+ Etioative (+++5)	
J.S.G.S.	AUTHORIZATION TO TR	AND AND NATURAL	045	
LAND OFFICE				
TRANSPORTER GAS				
OPERATOR				
PRORATION OFFICE				
SUN OIL COMPANY				
Address P.O. Box 1861, Mid1 Reason(s) for filing (Check proper		(Out		
New Well	Change in Transporter of:	Other (Please explain)		
Recompletion	Cii Dry C	Gas		
Change in Ownership(X)	Casinahead Gas Cond	ensate		
If change of ownership give nam and address of previous owner _	^e SUN TEXAS COMPANY, P.O.	Box 4067, Midland, TX	79704	
DESCRIPTION OF WELL AN	D LEASE	Formation j Xind of Lea	Se	
Watkins Location			rai or Fee Fee	
, , ,		Ine and S30 Feet From	The East	
	Township 24-S Bange	36-Е , ммрм,	Lea County	
DESIGNATION OF TRANSPO Nome of Authorized Transporter of	ORTER OF OIL AND NATURAL G	As TA'd Address (Give address to which appr	oved copy of this form is to be sentj	
Name of Authorized Transporter of	Casinghead Gas	Address iGive address to which appr	oved copy of this form is to be sent;	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? W	hen	
If this production is commingled COMPLETION DATA	with that from any other lease or pool,	, give commingling order number:	· · · · · · · · · · · · · · · · · · ·	
	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'	
Designate Type of Comple	(x) = (x)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	, Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
		U CEMERING RECORD		
HOLE SIZE	TUBING, CASING, AN		SACKS CENENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE			SACKS CEMENT	
HOLE SIZE			SACKS CEMENT	
	CASING & TUBING SIZE	DEPTH SET		
HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks	CASING & TUBING SIZE	DEPTH SET	l and must be equal to or exceed top allo	
TEST DATA AND REQUEST OIL WELL	CASING & TUBING SIZE	DEPTH SET	l and must be equal to or exceed top allo ift, etc.) Choke Size	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanka	CASING & TUBING SIZE	DEPTH SET DEPTH SET DEPTH SET Depth or be for full volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i	l and must be equal to or exceed top allo ift, etc.;	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	CASING & TUBING SIZE	DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure	l and must be equal to or exceed top allo ift, etc.; Choke Size	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test	CASING & TUBING SIZE	DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure	l and must be equal to or exceed top allo ift, etc.; Choke Size	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Longth of Test Actual Prod. During Test GAS WELL	CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE Tobing Pressure Cil-Bbie.	DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas l Casing Pressure Water-Bbis.	l and must be equal to or exceed top allo ift, etc.) Choke Size	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test	CASING & TUBING SIZE	DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure	l and must be equal to or exceed top allo ift, etc.; Choke Size	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Longth of Test Actual Prod. During Test GAS WELL	CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE Tobing Pressure Cil-Bbie.	DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas l Casing Pressure Water-Bbis.	l and must be equal to or exceed top allo ift, etc.) Choke Size	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Longin of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D	CASING & TUBING SIZE CASING & TUBING SIZE CASING & TUBING SIZE CONTROL	DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bble. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV	I and must be equal to or exceed top allo ift, etc.) Choke Size Gravity of Condenecte Choke Size ATION COMMISSION	
TEST DATA AND REQUEST OIL WELL Date First New Oil Bun To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules an Commission have been complied	CASING & TUBING SIZE CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE FOR ALLOWABLE FOR ALLOWABLE FOR ALLOWABLE Cable (Test must be able for this a Date of Test Cubing Pressure Cubing Pressure Cubing Pressure Cubing Pressure(Shut-In) NCE d regulations of the Oil Conservation with and that the information given	DEPTH SET DEPTH SET after recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bble. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV, APPROVED	I and must be equal to or exceed top allo i/i, etc.; Choke Size Gaa-MCF Gravity of Condenecte Choke Size ATION COMMISSION 	
TEST DATA AND REQUEST OIL WELL Date First New Oil Bun To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules an Commission have been complied	CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure Oil-Bbis. Cuength of Test Tubing Pressure (Shut-in) NCE d regulations of the Oil Conservation	DEPTH SET DEPTH SET Depth Set Depth Set Depth or be for full volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV, APPROVED Detextory	ATION COMMISSION	
TEST DATA AND REQUEST OIL WELL Date First New Oil Bun To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules an Commission have been complied	CASING & TUBING SIZE CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE FOR ALLOWABLE FOR ALLOWABLE FOR ALLOWABLE Cable (Test must be able for this a Date of Test Cubing Pressure Cubing Pressure Cubing Pressure Cubing Pressure(Shut-In) NCE d regulations of the Oil Conservation with and that the information given	DEPTH SET DEPTH SET Depth Set Depth Set Depth or be for full volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV, APPROVED Detextory	ATION COMMISSION	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules an Commission have been complied above is true and complete to t	CASING & TUBING SIZE CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE FOR ALLOWABLE FOR ALLOWABLE FOR ALLOWABLE Cable (Test must be able for this a Date of Test Cubing Pressure Cubing Pressure Cubing Pressure Cubing Pressure(Shut-In) NCE d regulations of the Oil Conservation with and that the information given	DEPTH SET DEPTH SET Depth Set Depth Set Depth of be for full volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV, APPROVED Detecle BY TITLE	ATION COMMISSION	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules and commission have been complied above is true and complete to t	CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure Oil-Sbls. Uning Pressure (Shut-in) NCE d regulations of the Oil Conservation with and that the information given the best of my knowledge and belief.	DEPTH SET DEPTH SET Depth SET Depth Set Depth Set Depth of be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV, APPROVED Dy TITLE This form is to be filed in If this is a request for sllov	And must be equal to or exceed top allo i/i, etc.; Choke Size Gravity of Condenecte Choke Size ATION COMMISSION 	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules and commission have been complied above is true and complete to the standard of the second se	CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure Oil-Bbls. Uning Pressure (Shut-In) NCE d regulations of the Oil Conservation with and that the information given the best of my knowledge and belief. gnature;	DEPTH SET DEPTH SET Depth SET Depth Set Depth Set Depth of be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV, APPROVED Dy TITLE This form is to be filed in If this is a request for sllov	I and must be equal to or exceed top allo i/t, etc.; Choke Size Gravity of Condenecte Choke Size ATION COMMISSION 	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules an Commission have been complied above is true and complete to t Commission have been complied bove is true and complete to t Complete to t Complete to t	CASING & TUBING SIZE CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Date of Test Cubing Pressure Oil-Bble. Cubing Pressure (Shut-in) NCE Cubing Pressure (Shut-in) NCE d regulations of the Oil Conservation with and that the information given the best of my knowledge and belief.	DEPTH SET DEPTH SET Depth SET Depth Set Depth or be for full volume of load on epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbls. Dill Conserve APPROVED TITLE This form is to be filed in If this is a request for silo well, this form must be accomps tests taken on the well in acco All sections of this form must	I and must be equal to or exceed top allo i/i, etc.; Choke Size Gravity of Condenecte Choke Size Choke Size ATION COMMISSION 	
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Pred. During Test GAS WELL Actual Pred. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA hereby certify that the rules an Commission have been complied above is true and complete to t Commission have been complied bove is true and complete to t Complete to t Complete to t	CASING & TUBING SIZE CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure Oil-Bbls. Uning Pressure (Shut-In) NCE d regulations of the Oil Conservation with and that the information given the best of my knowledge and belief. gnature;	DEPTH SET DEPTH SET Depth SET Depth Set Depth or be for full volume of load on epth or be for full 24 hours) Producing Method (Flow, pump, gas i Casing Pressure Water-Bbls. Dill Conserve APPROVED Dill CONSERV APPROVED Dill TITLE This form is to be filed in If this is a request for silor well, this form must be accompleted w able on new and recompleted w	I and must be equal to or exceed top allo i/i, etc.; Choke Size Gravity of Condenecte Choke Size Choke Size ATION COMMISSION 	

SANTAFE	REQUEST	FOR ALLOWABLE	Supersedes Old C-164 and C-1 Effective 1–1–65
FILE U.S.G.S. LAND OFFICE	AUT RIZATION TO TR	AND ANSPORT OIL AND FURAL	GAS
IRANSPORTER OIL		• • • • •	
GAS OPERATOR PROBATION OFFICE			
Operator			
SUN TEXAS		79704	
P. O. Box Reason(s) for filing (Check proper b	oxJ	Other (Please explain)	
New Wall Recompletion Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conde	H H	
If change of ownership give name and address of previous owner	TEXAS PACIFIC OIL COMP	ANY, INC. P. O. Box 40	067 Midland, TX, 79704
DESCRIPTION OF WELL ANI) LEASE Well No. Pool Name, Including F	ormation Kind of Lea	Ise Loose No.
	- I - I - I - I - I	State, Fode	ral or Fee fc-
Unit Letter;	Feel From The <u>) } { } } Lin</u>	ne andFeet From	n The
Line of Section T	ownship 31-5 Range	NMPM,	County
DESIGNATION OF TRANSPO Nerve of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which appr	oved copy of this form is to be sent)
Nome of Authorized Transporter of C	lasinghead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.		hen
If this production is commingled v COMPLETION DATA	vith that from any other lease or pool, Oil Well Gas Well	give commingling order number:	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Complet			P.B.T .D.
Date Spuddod	Date Compl. Ready to Prod.	Total Depth	P.B.1.U.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!1/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		D CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE		
· · · · · · · · · · · · · · · · · · ·			
TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	l and must be equal to or exceed top allow
Date First New Oil Hun To Tanks	Date of Test	Producing Method (Flow, pump, gas l	lift, etc.)
Longth of Tost	Tubing Prossure	Casing Pressue	Choke Size
Actual Prod. During Test	O11-Bb1a.	Water - Bbls.	Ges-MCF
]	
GAS WELL Actual Prod. Temi-MCF/D	Longth of Tost	Bbls. Condensate/AMCF	Gravity of Condensate
Tealing Mathod (pitol, back pr.)	Tubing Pressure (Shat-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIA		E OIL CONSERV	1980
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Orig. Signed by Ierry Sexton TITLE Dist 1. Supr.	
~	e 1 1		compliance with RULE 1104.
6.6	ic/da	li	wable for a newly drilled or deepered anied by a tabulation of the deviation
Regional Operat	ions Superintendent/West	tests taken on the well in according to the sections of this form m All sections of this form m while on new and recompleted w	ust be filled out completely for allow-
	SEP 1 2 1980	Fill out only Sections I, I	II. III, and VI for changes of owner, rier, or other such change of condition.
· · · · · · · · · · · · · · · · · · ·	······	Separate Forms C-104 mul	at be filed for each pool in multiply