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| TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL ORDER STORM NEW COLUMN TO Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) | exceed top all |
| Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) | |
| | |
| Length of Test Tubing Pressure Casing Pressure Choke Size | |
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| GAS WELL | |
| Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate | |

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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.

Tubing Pressure (Shut-in)

| Dark Valla | |
|----------------|---|
| (Signature) | _ |
| Production Mgr | |
| (Title) | |
| March 1,1970 | |
| (Date) | |

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Choke Size

OIL AND GAS INSPECTOR TITLE _

Casing Pressure (Shut-in)

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.