Des 264, Sada Fe, KM FF60-2668 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT 'Operator scam and Address Topat 011 Corporation 505 North Big Spring, Ste. 204 Midland, Texas 79701 'ART Neator 30-0 30-015-04638 N. Hackberry 'Pred Name 'Pred Name ''Pred	5 Copies		
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che op	,		
/I. Well Test Data			
"Chake Size	. Pressure		
	& Minhod		
" I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my			
Knowledge and belief.			
Approved by:	Approved by:		
Tom Schneider Title:			
Tide: President Approval Date: JUL 2 5 1995			
Date 7-10-95 Phone (915) 682-6340			
" If this is a charge of operator full in the OGRID number and name of the previous operator 005526 Llapto Production Company Effective 7-1-95			
Previous Operator Sugasture Prioted Name Tale			
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7-10-95 President

		m a residue	
	HIS IS AN AMENDED REPORT, CHECK THE BOX LABLED ENDED REPORT AT THE TOP OF THIS DOCUMENT	22.	The ULSTR location of this POD if it is different from the
	rt all gas volumes at 15.025 PSIA at 60°. rt all oil volumes to the nearest whole barrel.		settery A", "Jenes CPD" ata
A req accoi accoi	uest for allowable for a newly drilled or despened well must be mpanied by a tabulation of the deviation tests conducted in dance with Rule 111.	23.	The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district effice will easign a number and write it here.
Ail se new	ictions of this form must be filled out for allowable requests on and recompleted wells.	24.	The ULSTR location of this POD if it is different from the
Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.			well completion location and a short description of the POD (Example: "Battery A Weter Tank", "Jense CPD Water Tank", etc.)
		25.	MO/DA/YR drilling commenced
comp	parate C-104 must be filed for each pool in a multiple	26.	MO/DA/YR this completion was ready to produce
Impro	perly filled out or incomplete forms may be returned to	27.	Total vertical depth of the well
opera 1.		28.	Plugback vertical depth
2.	Operator's name and address	29.	Top and bottom perforation in this completion or casing also and TD if openhois
_	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Inside diameter of the well bare
3.	Reason for filing code from the following table:	31.	Outside diameter of the casing and tubing
	HC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing liner show top and bottom.
	AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter CG Change or transporter	33.	Number of eacks of coment used per apping and
	RT Request for test allowable (include value)	The to conduc	Howing test data is for an oil well it must be from a test ted only after the total volume of load oil is recovered.
4.	If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produced
5.	The API number of this well	36.	MO/DA/VR that gas was first produced into a single
6.	The name of the pool for this completion	36.	MO/DA/VR that the following test was completed
7.	The pool code for this pool	37.	Length in hours of the test
8.	The property code for this completion	38.	Flowing tubing pressure - oil wells
9.	The property name (well name) for this completion	38.	prosecure - gae wells
10.	The well number for this completion	•	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
	The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 114 sector Number	40.	Diameter of the choke used in the test
	for this location use that number in the 'UL or let ne.' box. Otherwise use the OCD unit letter.	41,	Barrels of oil produced during the test
11		42.	Remain ad an a

- Diameter of the choke used in the test 41.
 - Barrels of oil produced during the test 42.
 - Barrels of water produced during the test
 - 43. MCF of gas produced during the test 44.
 - Gas well calculated absolute open flow in MCF/D 45.
 - The method used to test the well: The method used to test the true; F Flowing P Pumping S Swabbing H other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call fer questions about this report 48.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.
- The permit number from the District approved C-129 for this completion MO/DA/YR of the C-129 approval for this completion MO/DA/YR of the expiration of C-123 approval for this

The producing method code from the fellowing table: F Flowing P Pumping or other artificial lift

MO/DA/YR that this completion was first connected to a

18. The gas or oil transporter's OGRID number

The bottom hole location of this completion

Lease code from the following table: F Federal S State P Fee J Jicarille

Navajo Ute Mountain Ute Other Indian Tribe

- 19.
- Name and address of the transporter of the product 20
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 21.
- Product code from the following table: 0 G Oil Gas

11.

12.

13.

14.

15.

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