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}	DISTRIBUTION SANTA FE /		CONSERVATION COMMISSION FOR ALLOWABLE	form C-104 Supersedes Old C-104 and C-110	
}	FILE /	REQUEST	AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
	LAND OFFICE			EPF1)	
	TRANSPORTER   OIL / GAS			Otlitud	
}	OPERATOR /			/ KLULI * LU \	
1.	PRORATION OFFICE			FFR 1 9 1071	
	Operator D. J. Common and			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Beard Oil Company		<del></del>	OIL CON. COM.	
ļ	2000 Classen Center.	Oklahoma City, Oklahom	a 73106	DIST. 3	
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New We!1	Change in Transporter of: Oil Dry Go			
	Recompletion Change in Ownership	Casinghead Gas Conde	<b>≒</b> !		
	Glidige III Ownership				
	If change of ownership give name and address of previous owner				
H.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including F	Formation Kind of Lea	se Navajo Lease No.	
	Joe Toledo		kota "D" - ext. State, Feder	Navajo 14-20-060	
	Location	L LUIL I IIIC DU	NY EM	9534	
	Unit Letter L; 1650 Feet From The South Line and 330 Feet From The West				
			NIMEN AND ASS	• County	
	Line of Section 8 Town	nship 17N Range 8	W , NMPM, McKin	ley	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oil XX or Condensate		Address (Give address to which approved copy of this form is to be sent)		
	The Permian Corporation Name of Authorized Transporter of Cast	Inghead Gas or Dry Gas	Box 3119, Midland, T	exas oved copy of this form is to be sent)	
	Name of Authorized Transporter of Casi	nghedd dds or b., dds			
	to all and age of or liquide	Unit Sec. Twp. P.ge.	Is gas actually connected?	hen	
	If well produces oil or liquids, give location of tanks.	M 8 17N 8W	no		
	If this production is commingled with	n that from any other lease or pool,	give commingling order number:		
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completion	n = (X)	X		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	2/5/71	2/18/71	2826 KB Top Oil/Gas Pay	2805 KB Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		, ,	
	6982 GR 6996 KB	Dakota "D"	2 <b>743</b> KB	2744 KB Depth Casing Shoe	
	2754-59' KB (5' @ 2 hpf.)			2825 KB	
		TUBING, CASING, AN	ID CEMENTING RECORD	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		
	7.7/0"	8-5/8" 4-1/2"	92 KB 2825 KB	40 sx regular	
	7 <b>-7/8"</b>	4-1/2		- 100 3x 01033 0	
	inside 4-1/2" csg	2-3/8"		none	
V.	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 allowable for this depth or be for full 24 hours)				
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
	2/16/71	2/18/71	Flow		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	12 Sq Gas-MCF 2 S 9	
	368	368	trace	2.59	
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	BBIs. Condensate/MMCF	Giant, or concentration	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	realing Markot (press, easy pro-				
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION FEB 1 9 1971		
			10		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Original Signed by Emery C. Arnold		
	above is true and complete to the best of my knowledge and belief.		SUPERVISOR DIST. #3		
			TITLE	OUTENVISOR DIST. #3	
			This form is to be filed in compliance with RULE 1104.		
	Joen D. (Phly - (Signature)		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.		
	Petroleum Engineer		- All sections of this form	must be filled out completely for allow	
	(Title)		I apre ou new sug recombined	able on new and recompleted wells.	

February 18, 1971 (Date)

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.