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	DISTRIBUTION SARTA FE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL (Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 GAS				
Hardware of the common state and the common state a		oadwy Golo. State Bank	Bldg. 10	F.POPP 7 South Tu					
	Denver, Colo. Recson(s) for filing (Check proper box) New Well Recompletion Change in Ownershix XXX If change of ownership give name and address of previous owner	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden	Other (Pleas	orrison, Co	lorado 80465				
	DESCRIPTION OF WELL AND L pase Name Presidio Federal Location	EASE Well No. Pool Name, Including Fo	1 t		^{or Fe} Federal	Lease No. SF 078474			
III.	DESIGNATION OF TRANSPORT	reship 25 N Range 8 ER OF OIL AND NATURAL GA	W , NMPI		uan	County			
	Name of Authorized Transporter of Oil Permian Corp. Name of Authorized Transporter of Cast None	Address (Give address to which approved copy of this form is to be sent) 1600 Broadway Denver Cology of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) Is gas actually connected? When							
IV.	If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA		No give commingling ord		Plug Back Same Res	'v. Diff. Res'v.			
	Designate Type of Completion Date Spudded 12-29-71		Total Depth 6717 Top Oil/Gas Pay	j j	P.B.T.D. (413 Tuping Depth				
	6581 KB Granerous- DAkota Perforations 6338-6350		6338 кв		6323 KB Depth Casing Shoe				
		CEMENTING RECORD DEPTH SET		SACKS CEMENT					
	HOLE SIZE	CASING & TUBING SIZE	+		150 SX				
	12 1/4 7 7/8	8 5/8 4 1/2	- 200 - 6717		400 sx6717, 4 :	30 sx 4694			
		2 ¹¹ EUE	6323	<u> </u>	3 00 sx 2039 -Anchor 6 3 00				
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)								
OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)									
	March 3, 1972 April 1-9 Cosing Pressure				Choke Size				
	Length of Test	Tubing Pressure	25-3	30					
	Actual Prod, During Test 310 Oil-Bbis. Water-Bbis.			Gas-MCF					
			10		TSTM				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MM	ICF	Gravity of Condensate	,			
		Tubing Pressure (Shut-in)	Call 7 3 ressure (Sh	ut-in)	Choke Size				
	Testing Method (pitot, back pr.)	OIL COM	V cou						
010-			3 OIL CONSERVATION COMMISSION						
	I hereby certify that the rules and a Commission have been compiled v shove is true and complete to the	APPROVED JAN 2 9 1973 . 19							
			TITLE SUPERVISOR DIST. #3						
	Manns Pops	ature)	This form is to be filed in compliance with RULE 1104. If this is a request for silowable 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 allow-						
	1-23-73	ile) zie)	sble on new and recompleted wells. Fitl out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition						
	(D)	,	11						