

ILLEGIBLE

FOOD	OIL	/
BEVERAGES	GAS	/
TOBACCO		/
OTHER		

Date: <input type="text"/>		Time: <input type="text"/>	
Patient Name: <input type="text"/>		Room: <input type="text"/>	
Doctor: <input type="text"/>		Nurse: <input type="text"/>	
Chief Complaint: <input type="text"/>		History: <input type="text"/>	
Physical Exam: <input type="text"/>		Lab Results: <input type="text"/>	
Treatment Plan: <input type="text"/>		Progress Notes: <input type="text"/>	

If change of ownership give name and address of previous owner _____

1. NAME OF THE WELL AND LEASE		2. Kind of Lease	3. Lease No.
Name of the well and lease		State, Federal or Foreign	

_____ Feet From The _____

1. Well produced oil or liquids, classification of tanks.					2. Well produced oil or liquids, classification of tanks.				
Unit	Sec.	Co.	Reg.	Plat.	Unit	Sec.	Co.	Reg.	Plat.

If this production is compared with that from any other source or group, the corresponding order numbers:

Date Spudded		Date Compl. Ready to Prod.	Depth	P.B.T.D.
1-5-57		1-10-57	1000	1000
Elevation (Ht., REE, RT, GR, etc.)		Name of Producing Formation	Thickness, One Day	Tubing Depth
5400.00		1200.00	1000	1000
Perforations				Depth Casing Shoe
4798-05, 4796-05, 4794-05, 4792-05				1000
TUBING, CEMENT, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
1 1/2"	2 1/2"	4302	15.00	
	2 1/2"	1000		

1. The amount of lead oil and must be equal to or exceed top element of lead oil.

[illegible]

Gravity C. Correlation	0.95
Chloride	0.95

RESERVATION OF RIGHTS

JAN 10 1969

Original Signed by Emery C. Arnold

SUPERVISOR DIST. #9

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 logs taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowance on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, wall name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

(Signature)

(Title)

January 3 1960

(Date)