|      |  | *_   |  |   |  | 1  |   |                                     |                                 |
|------|--|--|--|---|--|--|---|-------------------------------------|---------------------------------|
|      | NO. OF COPIES RECEIVED   |  |  |   |  |  |   |                                     |                                 |
|      | DISTRIBUTION   |  |  |   |  |  |   |                                     |                                 |
|      | SANTA FE /   | NEW MEXICO OIL CONSERVATION COMMISSION   |  |   |  |  |   | C-104                               | <b>69</b> 104 - 16 114          |
|      | FILE /   | REQUEST FOR ALLOWABLE  AND  REQUEST FOR ALLOWABLE  Suppose of the Color of the Colo |  |   |  |  |   |                                     |                                 |
|      | U.S.G.S.   | AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS   |  |   |  |  |   |                                     |                                 |
|      | LAND OFFICE  | JUL 18 18  |  |   |  |  |   |                                     |                                 |
|      | TRANSPORTER OIL /  |  |  |   |  |  |   |                                     |                                 |
|      | OPERATOR 2   |  |  |   |  |  | O. C  | DEFICA                              |                                 |
| I.   | PRORATION OFFICE .   |  |  |   |  |  |   |                                     |                                 |
|      | Operator TEXACO Inc.   |  |  |   |  |  |   |                                     |                                 |
|      | Address  |  |  |   |  |  |   |                                     |                                 |
|      | P. O. Box 728,   | Hobbs New Men  | rian Resea   |   |  |  |   |                                     |                                 |
|      | Reason(s) for filing (Check proper box)  |  | 140 66240  | Other   | (Please  | erplain  | <del></del>   | <u> </u>                            |                                 |
|      | New We!!   | Other (Please explain)   |  |   |  |  |   |                                     |                                 |
|      | Recompletion   | To show change in plant ownership  |  |   |  |  |   |                                     |                                 |
|      | Change in Ownership  | sate from Skelly on Co.  |  |   |  |  |   |                                     |                                 |
|      | Simulo in Simulo | Casinghead Gas (   |  | <i>f</i>  | rom &  | Rely   | onco.   |                                     |                                 |
| •    | If change of ownership give name   |  |  |   |  |  |   |                                     |                                 |
|      | and address of previous owner  |  |  |   |  |  | <del></del>   |                                     |                                 |
| II.  | DESCRIPTION OF WELL AND I  | LEASE  |  |   |  |  |   |                                     |                                 |
|      | Lease Name   | Well No. Pool No   | ame, Including F   | ormation  |  | Kind of Lea  | se  |                                     | Lease No.                       |
|      | New Mexico 'CN' State 1 Loco Hills Mc  |  |  | TOW Gas   |  | State, Fede  | ral or Fee  |                                     | -8095-5                         |
|      | Location   |  |  |   | _  | _  |   |                                     |                                 |
|      | Unit Letter F; 198   | Feet From The  | West Lin   | e and 1980  |  | _ Feet From  | The North   |                                     |                                 |
|      |  |  | 20   |   |  |  |   |                                     |                                 |
|      | Line of Section 15 Tow   | mship 17-S   | Range 30   | <b>-</b> L  | , NMPM,  | ·  | Eddy  |                                     | County                          |
|      |  |  |  | _   |  |  |   |                                     |                                 |
| III. | DESIGNATION OF TRANSPORT  Name of Authorized Transporter of Oil  | or Condensat   |  | .5  |  |  |   |                                     | ,                               |
|      | Rdite of Admortzed Transporter of Off  |  |  | Address (Give )   | address to   | which appr   | oved copy of this   | s form is to                        | be sent)                        |
|      | The Permiso Corporation  |  | re (X)   | į.  |  |  | oved copy of this   | s form is to                        | be sent)                        |
|      | The Permian Corporation  | D.   | •  | 1509 West   | Wall,  | Midler   | d. Texas  |                                     |                                 |
|      | The Permian Corporation Name of Authorized Transporter of Cas Continental Oil Company  | inghead Gas or E   | •  | 1509 West   | Wall,  | Midler   | d. Texas  |                                     |                                 |
|      | Name of Authorized Transporter of Cas Continental Cil Compan   | inghead Gas or I   | Ory Gas 🐔  | 1509 West   | Wall, address to   | Midler<br>which approved to the City   |   |                                     |                                 |
|      | Name of Authorized Transporter of Cas  Continental Cil Compan  If well produces oil or liquids,  | inghead Gas or I   | •  | Address (Give, Drawer 12) Is gas actually   | Wall, address to   | Midler<br>which approved to the City   | od Texas  roved copy of this  y, Oklahor  Then  | s form is to                        | be sent)                        |
|      | Name of Authorized Transporter of Cas  Continental Oil Compan  If well produces oil or liquids, give location of tanks.  | inghead Gas or I   | Dry Gas <b>X</b> wp. Rge.  17-8 30-E   | Address (Give, Drawer 12) Is gas actually Yes   | address to   | Hidler<br>which appropriately<br>found CI  | oved copy of this   | s form is to                        | be sent)                        |
|      | Name of Authorized Transporter of Cas  Continental Oil Compan  If well produces oil or liquids, give location of tanks.  If this production is commingled wit  | inghead Gas or I   | Dry Gas <b>X</b> wp. Rge.  17-8 30-E   | Address (Give, Drawer 12) Is gas actually Yes   | address to   | Hidler<br>which appropriately<br>found CI  | od Texas  roved copy of this  y, Oklahor  Then  | s form is to                        | be sent)                        |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  | inghead Gas or I   | Dry Gas <b>X</b> wp. Rge.  17-8 30-E   | Address (Give, Drawer 12) Is gas actually Yes give commingli  | address to   | Hidler<br>which appropriately<br>found CI  | od Texas  roved copy of this  y, Oklahor  Then  | s form is to<br>7460                | be sent)                        |
|      | Name of Authorized Transporter of Cas  Continental Oil Compan  If well produces oil or liquids, give location of tanks.  If this production is commingled wit  | inghead Gas or I   | wp.   Rge.   17-8   30-E   lease or pool,  | Address (Give, Drawer 12) Is gas actually Yes give commingli  | address to   | Widler  which appropriately  pea CI  i?  which appropriately  which appropriately  which appropriately  must a circle  must a  | oved gopy of this  y, Okinhor  Then  Tebruary   | s form is to<br>7460                | be sent)                        |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  | inghead Gas or I   | wp. Rge. 17-S 30-E lease or pool, Gas Well   | Address (Give, Drawer 12) Is gas actually Yes give commingli  | address to   | Widler  which appropriately  pea CI  i?  which appropriately  which appropriately  which appropriately  must a circle  must a  | oved gopy of this  y, Okinhor  Then  Tebruary   | s form is to<br>7460                | be sent)                        |
|      | Name of Authorized Transporter of Cas  Continental Oil Compan  If well produces oil or liquids, give location of tanks.  If this production is commingled wit  COMPLETION DATA  Designate Type of Completio  | inghead Gas or I   | wp. Rge. 17-S 30-E lease or pool, Gas Well   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well We Total Depth  | address to<br>connected<br>ang order   | Widler  which appropriately  pea CI  i?  which appropriately  which appropriately  which appropriately  must a circle  must a  | roved copy of this  y ok inho  Then  February  Plug Back  P.B.T.D.                                  | 7460<br>21. 196                     | be sent)                        |
|      | Name of Authorized Transporter of Cas  Continental Oil Compan  If well produces oil or liquids, give location of tanks.  If this production is commingled wit  COMPLETION DATA  Designate Type of Completio  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.   | Address (Give, Drawer 12) Is gas actually Yes give commingli  | address to<br>connected<br>ang order   | Widler  which appropriately  pea CI  i?  which appropriately  which appropriately  which appropriately  must a circle  must a  | oved gopy of this  Ty Ok Inho  Then  Plug Back  | 7460<br>21. 196                     | be sent)                        |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded   | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well We Total Depth  | address to<br>connected<br>ang order   | Widler  which appropriately  pea CI  i?  which appropriately  which appropriately  which appropriately  must a circle  must a  | P.B.T.D.  Tubing Depti  | 7460<br>21, 196                     | be sent)                        |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded   | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well We Total Depth  | address to<br>connected<br>ang order   | Widler  which appropriately  pea CI  i?  which appropriately  which appropriately  which appropriately  must a circle  must a  | roved copy of this  y ok inho  Then  February  Plug Back  P.B.T.D.                                  | 7460<br>21, 196                     | be sent)                        |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)   | inghead Gas or I   | wp.   Rge.   17-S   30-E   lease or pool,   Gas Well   Prod.   | Address (Give, Draines 12) Is gas actually Yes give commingli New Well Total Depth Top Oil/Gas Po   | address to   | Widler yhich ager your and a constant ager CI  | P.B.T.D.  Tubing Depti  | 7460<br>21, 196                     | be sent)                        |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations   | inghead Gas or D   | wp.   Rge.   17-8   30-E   lease or pool,   Gas Well   Prod.   rmation   CASING, ANE   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well Total Depth Top Oll/Gas P   | address to connected and order orkover   | which ages of the CI   | Plug Back P.B.T.D.  Tubing Depth  | s form is to 7460 21. 196 Same Rest | be sent) 2  8  v. Diff. Res'v.  |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)   | inghead Gas or I   | wp.   Rge.   17-8   30-E   lease or pool,   Gas Well   Prod.   rmation   CASING, ANE   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well Total Depth Top Oll/Gas P   | address to   | which ages of the CI   | Plug Back P.B.T.D.  Tubing Depth  | 7460<br>21, 196                     | be sent) 2  8  v. Diff. Res'v.  |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations   | inghead Gas or D   | wp.   Rge.   17-8   30-E   lease or pool,   Gas Well   Prod.   rmation   CASING, ANE   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well Total Depth Top Oll/Gas P   | address to connected and order orkover   | which ages of the CI   | P.B.T.D.  Tubing Depth  | s form is to 7460 21. 196 Same Rest | be sent) 2  8  v. Diff. Res'v.  |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations   | inghead Gas or D   | wp.   Rge.   17-8   30-E   lease or pool,   Gas Well   Prod.   rmation   CASING, ANE   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well Total Depth Top Oll/Gas P   | address to connected and order orkover   | which ages of the CI   | P.B.T.D.  Tubing Depth  | s form is to 7460 21. 196 Same Rest | be sent) 2  8  v. Diff. Res'v.  |
|      | Name of Authorized Transporter of Cas Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations   | inghead Gas or D   | wp.   Rge.   17-8   30-E   lease or pool,   Gas Well   Prod.   rmation   CASING, ANE   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well Total Depth Top Oll/Gas P   | address to connected and order orkover   | which ages of the CI   | P.B.T.D.  Tubing Depth  | s form is to 7460 21. 196 Same Rest | be sent) 2  8  v. Diff. Res'v.  |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  | inghead Gas or I   | wp. Rge. 17-S 30-E lease or pool, Gas Well Prod. rmation , CASING, AND   | Address (Give Deares 12) Is gas actually Yes give commingli New Well We Total Depth Top Oil/Gas P   | address to connected and order orkover   | Nidlar Which age Pace CI  Pace | P.B.T.D.  Tubing Depth  Depth Casing  | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Drawer 12) Is gas actually Yes give commingli New Well Total Depth Top Oll/Gas P   | address to see the connected of the conn | widler yhich ager your control of the control of th | P.B.T.D.  Tubing Depth  Depth Casing  | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Deares 12) Is gas actually Yes give commingli New Well Total Depth Top Oil/Gas Po  | address to see the connected of the conn | widler yhich ager your control of the control of load or   | P.B.T.D.  Tubing Depti  | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Deares 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas Pe  | address to see the connected of the conn | widler yhich ager your control of the control of load or   | P.B.T.D.  Tubing Depti  | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Deares 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas Pe  | address to see the connected of the conn | widler yhich ager your control of the control of load or   | P.B.T.D.  Tubing Depti  | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Cil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Drawer 12)  Is gas actually Yes  give commingli New Well Wes  Total Depth  Top Oil/Gas P.  CEMENTING  Definition of the period | address to see the connected of the conn | widler yhich ager your control of the control of load or   | Plug Back P.B.T.D.  Tubing Depth Depth Casino  SA  lift, etc.)  Choke Size                          | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Cil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Drawer 12)  Is gas actually Yes  give commingli New Well Wes  Total Depth  Top Oil/Gas P.  CEMENTING  Definition of the period | address to see the connected of the conn | widler yhich ager your control of the control of load or   | Plug Back P.B.T.D.  Tubing Depth Depth Casing   | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  Length of Test   | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Drainer 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas P  | address to see the connected of the conn | widler yhich ager your control of the control of load or   | Plug Back P.B.T.D.  Tubing Depth Depth Casino  SA  lift, etc.)  Choke Size                          | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  Length of Test   | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Drainer 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas P  | address to see the connected of the conn | widler yhich ager your control of the control of load or   | Plug Back P.B.T.D.  Tubing Depth Depth Casino  SA  lift, etc.)  Choke Size                          | s form is to 7460 21. 196 Same Res' | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Cil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Draines 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas Po CEMENTING DE fter recovery of topth or be for full Producing Meth Casing Pressur Water-Bbls.  | address to the connected of the connecte | number: Deepen pump, gas   | Plug Back P.B.T.D.  Tubing Depth Depth Casing  If and must be equilifit, etc.)  Choke Size  Gas-MCF | Same Rest                           | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Cil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  | inghead Gas or I   | wp. Rge.  17-S 30-E  lease or pool,  Gas Well  Prod.  rmation  CASING, AND BING SIZE   | Address (Give, Drainer 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas P  | address to the connected of the connecte | number: Deepen pump, gas   | Plug Back P.B.T.D.  Tubing Depth Depth Casino  SA  lift, etc.)  Choke Size                          | Same Rest                           | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  | inghead Gas or I   | wp.   Rge.   17-S   30-E   lease or pool,   Gas Well   Prod.   Gas Well   Prod.   Ray   Ra | Address (Give, Drainer 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas P  | address to see the connected or | number: Deepen T  T  Deepen  Deepen  Deepen  Deepen  Deepen  Deepen  Deepen  | Plug Back P.B.T.D.  Tubing Depti Depth Casing  It and must be equilifit, etc.)  Gravity of C        | Same Rest                           | be sent)  2  S  V. Diff. Res'v. |
| IV.  | Name of Authorized Transporter of Cas  Continental Cil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled wit COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  | inghead Gas or I   | wp.   Rge.   17-S   30-E   lease or pool,   Gas Well   Prod.   Gas Well   Prod.   Ray   Ra | Address (Give, Draines 12) Is gas actually Yes give commingli New Well Wes Total Depth Top Oil/Gas Po CEMENTING DE fter recovery of topth or be for full Producing Meth Casing Pressur Water-Bbls.  | address to see the connected or | number: Deepen T  T  Deepen  Deepen  Deepen  Deepen  Deepen  Deepen  Deepen  | Plug Back P.B.T.D.  Tubing Depth Depth Casing  If and must be equilifit, etc.)  Choke Size  Gas-MCF | Same Rest                           | be sent)  2  S  V. Diff. Res'v. |

## VI. CERTIFICATE OF COMPLIANCE

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.

Assistant District Superintendent

July 17, 1969

(Date)

OIL CONSERVATION COMMISSION

APPROVED Bressett

TITLE GIL AND GOAS JUSTECTOL

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.