1.	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OF FICE IRANSPORTER GAS OPERATOR PRORATION OF FICE	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 GAS	
	Address		9701 Other (Please explain) Change of Open Tipperary Reso	F	
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND Lease Maint Sinclair A State Location	Well No. Pool Name, Including F	y Penn State, Føder	al o. Fee State E-7332	
		Feet From The <u>SOUth</u> Lin		The <u>Fast</u> County	
			· · · · · · · · · · · · · · · · · · ·		
III.	DESIGNATION OF TRANSPOR	X or Condensate	Address (Give address to which appro		
	AMOCO Pipeline Company Name of Authorized Transporter of Casinghead Bas 🔀 or Dry Gas 🗔		3411 Knoxville Ave; Lubbock, Tex 79413 Address (Give address to which approved copy of this form is to be sent)		
	Warren Petroleum 11 well produces cil or liquids, give location of tarks.	Corporation Unit Sec. Twp. Rge. O 22 118 33E	Box 1589; Tulsa, (Is gas actually connected? Yes	Dklahoma 73101 1-1-69	
IV.	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	, 	
	Designate Type of Completic	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations	L	1	Depth Casing Shoe	
		· · · · · · · · · · · · · · · · · · ·	CEMENTING RECORD	-1	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
•,				and must be equal to or exceed top allow-	
v .	TEST DATA AND REQUEST FOR ALLOWABLE OIL WEIL (Test must be after recovery of total volume of load oil and must be equal to or exceed able for this depth or be for full 24 Lours) I Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Fred, During Test	Cii-Bbis.	Water-Bble,	Gas-MCF	
	GAS WELL				
	Actual Pred, Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and r Commission have been complied w above is true and complete to the	ith and that the information given	APPROVED JUL V BY <u>Jeslie</u> TITLE OIL 2000	1 Almante	
			This form is to be filed in compliance with RULE 1104.		
-	Jane Sch (Signa	imidt (ure)	well, this form must be accompa	wable for a newly drilled or deepened inied by a tabulation of the deviation referee with RULE 111.	

(Signet are)		tes
		(ea
Fave Schmidt - Production Clerk	1	
CLY Sen Discourse of the second state of the s	1	
(Title)	Į.	

tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-

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JUNE 1971 OIL CONSERVATION COMM. HOBES, K. K.