		-	RE	CEIVED
1.	Instruction SANTATE FILE U.S.G.S. LAND OFFICE IRANSPORTER OPETATOR PROPATION OFFICE OPETATION OFFICE	REQUEST		Form C-104 Supersedes Old C-104 and C-11 151982ctive 1-1-65 AS , C. D. SIA, OFFICE
	Address 0. Box 3669, Midland, TX 79702			
	Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership		HANGE IN NAME	ONLY
	If change of ownership give name William N. Beach and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE Lease Name HINKLE STATE No. Fool Name, Including Formation Kind of Lease State Location Location Continue Continue <th>cr Fee State E-10068</th>				cr Fee State E-10068
	Unit Letter;	60 Feet From The Lin		
		mship Runge	28-Е , ммрм,	Eddy County
III.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which approv	
	The <u>Bermian</u> Corporation Name of Authorized Transporter of Cas CONOCO		P. O. Box 1183, Houston Address (Give address to which approv 7408 Andrews Highway, O Is gas actually connected?	dessa, TX 79762
	give location of turits.	Unit Sec. Twp. Pge. N 25 16S 28E	Yes	1-82
IV.	If this production is commingled wit COMPLETION DATA Designate Type of Completio	Oil Well Gas Well	give commingling order number:	Plug Back Same Res'v. Diff. Res'v.
	Date Spudied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RNB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
	Perforations]	Depth Casing Shoe
			CEMENTING RECORD	SACKS CEMENT
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	
			·	
•	TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be a)	1 fter recovery of total volume of load oil o	ind must be equal to or exceed top allow-
Υ.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be af able for this de able for this de able for this de able for this de for thi		pih or be for full 24 hours) Producing Method (Flow, pump, gas lif	TP-
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Cti-Bbis.	Water-Bbls.	Gas-MCF
	GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bbis, Condensate/MMCF	Gravity of Condensate
	Testing Nethod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Cheke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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.		APPROVED	
			BY	
			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 allow-	
	3/12/82	le)	able on new and recompleted wells.	
	3/12/02 (Date)		Fill out only Sections 1, 11, 111, and the such change of condition, 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.	