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7	P. 0. Box 2239, To	ulsa, Okl	ahoma 74101						
-	Reason(s) for filing (Check proper box)	 			Other (Please	explain)			
- 1	New Well	Change in	Transporter of:						
	Recompletion	Oil	Dr	y Gas					
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Length of Test

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.

(Signature)

Chief Clerk (Title)

July 7, 1969

(Date)

Tubing Pressure (Shut-in)

M. M. Tharp

GAS WELL

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Choke Size

Gravity of Condensate

OIL	CONSERVATION C	NOISSIMMC
	1111	

APPROVED BY.

Bbls. Condensate/MMCF

TITLE .

Casing Pressure (Shut-in)

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.