Reason(s) for filing (Check proper box) New Well	AUTHORIZATION TO TRAN	SPORT OIL AND NATURSERA	rator Only.
Change in Ownership  If change of ownership give name and address of previous owner	Casinghead Gas Condense	ate	
DESCRIPTION OF WELL AND L	FASE    Well No.   Fool Name, Including For     2   Square Lake,     D   Feet From The   NorthLine	GhgS.A. Kind of Lease State, Federal ond 660 Feet From Ti	crFee Federal LC0293381
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Note of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)  None of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  INJECTION WELL			
It well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA	Om.	ive commingling order number:	Plug Back   Same Resty, Diff. Resty.
Designate Type of Completion	Date Compl. Ready to Prod.	Total Depth Top Ctl/Gas Pay	F.B.T.D. Tubing Depth
Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., Reme C. Flodering and Elevations (I)F, RAB, RT, GR, etc., RT, RAB, RT, RT, RT, RT, RT, RT, RT, RT, RT, RT			
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST FOR ALLOWABLE  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  OIL WELL  Producing Method (Flow, pump, gas lift, etc.)			
Date First New Oil Run To Tanks Length of Test	Tubing Pressure	Cosing Pressure	Choke Size
Actual Fred. During Test	Oil-Bble.	Water - Bbie.	1/10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
GAS WELL	Length of Test	Ebis. Concensate AAVOF  Cosing Pressure (Shut-in)	Gravity of Condensate  Choke Size
CERTIFICATE OF COMPLIAN	Tubing Pressure (Shut-in) CE	OIL CONSERVA	ATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given and e is true and complete to the best of my knowledge and belief.		SEP 1 4 1983  BY WALL WARD GAS INSPECTOR	
HARVARD PETROLEUM CORPORATION  (Signalure) H. Lee Harvard  President  (Title)		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.	
ļi —		Fill out only Sections I. I	I. III, and VI for changes of owner, ter, or other such change of condition at be filed for each pool in multiply