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Actual Prod. During Test Oil - Bbls. Water - Bolk GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (puol. back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. OIL 0 1 1991 Signature ORIGINAL SIGNED BY By Protein Name Title OIL CONSERVISOR, DISTRICT #	Length of Test	Tubing Pressure	Casing Pressure	
GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Coodensate/MMCF Gravity of Condensate Testing Method (puor. back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby cerufy that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief. OIL 0 1 1991 Signature F. D. Schoch Area Manager By Prised Name Title ORIGINAL SIGNED BY 6/27/91 (915) 362-6302 Title	Actual Prod. Dunne Test	Oil - Bbls.	Water - Bbis.	Gas- MCF
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (puor. back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION Signature F. D. Schoch Area Manager ORIGINAL SIGNED BY Franced Name 6/27/91 Title Title	Actual From Doming Form			
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (puor, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby ceruly that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION Signature F. D. Schoch Area Manager ORIGINAL SIGNED BY Mike WillLiAMS Supervision, Division, Division, District for Title OISTRICT for Title	GAS WELL			
Testing Method (puor, back pr.) Tubing Pressure (Shull-in) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Is true and complete to the best of my knowledge and belief. JUL 0 1 1991 Signature ORIGINAL SIGNED BY F. D. Schoch Area Manager Title SUPERVISUR, DISTRICT IN Title Title		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing method (plus, black pr) VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby cerufy that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Is true and complete to the beat of my knowledge and belief. OIL CONSERVATION DIVISION Date Approved JUL 0 1 1991 ORIGINAL SIGNED BY Signature F. D. Schoch Area Manager Printed Name Title 6/27/91 (915) 362-6302		Tubing Presquee (Chut-in)	Casing Pressure (Shut-in)	Choke Size
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature F. D. Schoch Area Manager Title 0/12 COTVOLT TVT TOTVET Detector ORIGINAL SIGNED BY By MIKE WILLIAMS SUPERVISUR, DISTRICT # Title 0/27/91	Testing Method (pilot, back pr.)	Troug tressue (sum.m)		
I hereby ceruly that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature F. D. Schoch Area Manager Title 0 ORIGINAL SIGNED BY Supervision 0 ORIGINAL SIGNED BY Title 0 ORIGINAL SIGNED BY Title	VI OPERATOR CERTIFI	CATE OF COMPLIANCE		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature F. D. Schoch Area Manager Proted Name 6/27/91 (915) 362-6302 Date Approved JUL 0 1 1991 Date Approved JUL 0 1 1991 Date Approved JUL 0 1 1991 MIKE WILLIAMS SUPERVISUR, DISTRICT F Title	I hereby certify that the rules and reg	ulations of the Oil Conservation		ERVATION DIVISION
Signature ORIGINAL SIGNED BY F. D. Schoch Area Manager Proted Name Title 6/27/91 (915) 362-6302	Division have been complied with an	d that the information given above		1111 o t toot
Signature By MIKE WILLIAMS F. D. Schoch Area Manager SUPERVISUR, DISTRICT I Pnoted Name Title Title 6/27/91 (915) 362-6302 Title		T A DE DE TATELE ALLE LECTICA.	II Date Approved	
Standarte Supervision F. D. Schoch Area Manager SUPERVISOR, DISTRICT IF Proted Name Title Title 6/27/91 (915) 362-6302 Title	is true and complete to the best of m	,		
Proted Name Title Title 6/27/91 (915) 362-6302 Title	is true and complete to the best of m		ORIGINAL	SIGNED BY
6/27/91 (915) 362-6302	Signature		ORIGINAL By <u>Mike Wil</u>	LIAMS
Date Telephone No.	Signature F. D. Schoch	Area Manager	ORIGINAL By <u>Mike Wil</u> SUPERVIS	LIAMS

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.