HO. OF COPICS RECEIVED		15	
DISTRIBUTION			
SANTA FE		/	
FILE		1	L
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
TRANSPORTER	GAS	1	
OPERATOR		1	
PROBATION OFFICE			

	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Elioctive 1-1-65	
	U.S.G.S.	ALITHOPIZATION TO TRA	AND ANSPORT OIL AND NATURAL (		
	LAND OFFICE	AUTHORIZATION TO TRA	AND TATURAL (	)A3	
	TRANSPORTER GAS /	_			
	OPERATOR /				
ì.	PRORATION OFFICE				
	Crown Central Pet	roleum Corporation			
	1010 Bank of the	Southwest Bldg., Hou	ston, Texas 77002		
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)		
	Recompletion	Oil Dry Go	as 🔲	•	
	Change in Ownership X	Casinghead Gas Conde	nsate		
	If change or ownership give name and address of previous owner	Sunset Internationa	l Petroleum Corporat n Tower, Dallas, Texa	10n	
II.	DESCRIPTION OF WELL AND	LEASE	•		
	Lease Name	Well No. Pool Name, Including F	Segra Fadara		
	Kutz Federal	12   Basin Dak	ota Side, Federo	Fed. SFØ77383 &	
	Unit Letter M ; 790	O Feet From The South Lis	ne and 790 Feet From	The West	
	Line of Section 21 To	waship 28N Range 1	ОW , ммрм, San J	'uan County	
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	18	•	
	Name of Authorized Transporter of Oil		Address (Give address to which appro	ved copy of this form is to be sent)	
	Plateau, Inc. Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 🛣	P.O. Box 108, Farm	ved copy of this form is to be sent)	
	Southern Union Ga		Fidelity Union Tow	•	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en ,	
	If this production is commingled wi	ith that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completion	i			
	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			Depth Casing Shoe	
	HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD	CACKE CENENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
۸					
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow	
,	OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours)  Producing Method (Flow, pump, gas li	1 ton 2 ii	
	Date / Het Hew Off Hall 10 1 dike	24.00. 100.	Producting Motitod (1 sow) pamp, See so		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil - Bbls.	Water-Bbls.	Gas-MEDV 3 1971	
	•			LOU CON COM	
				DIST. 3	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	/I. CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION	
			APPROVED NOV 3 1971, 19		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Oniginal Signed by Emery C Arnold			
	above is true and complete to the best of my knowledge and belief.				
		TITLE SUPERVISOR DIST. #3			
	M. R. Ghombson  (Signator)  Agent		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 accompa- tents taken on the well in accor	nied by a tabulation of the deviation	
			All sections of this form mu	at be filled out completely for allow-	
	(Til	tle)	Il abte on men and managed and	•••	