1.	wo. or corics acceives DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OF FICE IRANSPORTER OPERATOR PRORATION OFFICE Operator K&R OIL & GAS Address 2607 Cornell Driv Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership X	REQUEST I AUTHORIZATION TO TRA	Other (Please explain)	Form C-104 Supersodes Old C-JOS and C Effective 1-1-85 IS RECEIVED JAN 12'90 ARTESIA, OFFICE
	If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND I Lecas Name Cannon Z Location Unit Letter ; 990	LEASE Well No. Pool Name, including Fo 2Y Bitter Lakes 2Y Bitter Andres	Box 1517, Roswell, N, matter West and 358 Feet From Th	r Fee Fee
111 .	DESIGNATION OF TRANSPORT None of Authorised Transporter of Oll Navajo Refining Co		s Address (Give address to which approve P.O. Drawer 159 Artes	d copy of this form is to be sent) Sia, N.M. 88211
	Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with <u>COMPLETION DATA</u> Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Inghead Gas or Dry Gas Unit Sec. Twp. Pge. A 17 10S 25E In that from any other lease or pool, Oth Well Gas Well	Addrees (Give address to which approve Is gas actually connected? When <u>NO</u> give commingling order number: New Well Workover Deepen Total Depth	d copy of this form is to be sent)
	Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD			· · ·
		CASING & TUBING SIZE	DEPTH SET	
v .	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top all able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Producting Method (Flow, pump, gas lift, etc.)			
	Length of Test Actual Prod. During Test	Tubing Pressure Oil - Bble.	Casing Pressure Water - Bbis,	Choke Bize
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MA/CF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (shut-is)	Casing Pressure (Shut-in)	
VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oli Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. George W. Rampley lace Wear for the formation given a partner (Signature) Jan 9 1990 (Dote)			OIL CONSERVATION COMMISSION APPROVED JAN 2 3 1990	