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Oil Well Gas Well New Well Workover Deepen Plug Buck Same New .	. Din. Res
Designate Type of Completion - (X)	!
Date Spudded Date Compi. Ready to Prod, Total Depth P.B.T.D.	
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Pool Name of Producing Permution 109 011/ 022 14/	
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TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEME	NT
	<u>, , , , , , , , , , , , , , , , , , , </u>
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or ex	seed top all
able for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)	
No Change Choke Size	
Length of Test Tubing Pressure Casing Pressure	
Actual Brod During Test Cil-Bbls. Water-Bbls. Gas-MCF	
Actual Prod. During Test CII-Bbis.	
GAS WELL	
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	
Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size	
CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION	

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.

APPROVED SUPERVISOR, DISTRICT II 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.

Fill out Sections I. II. III. and VI only for changes of owner, well name or number or transporter or other such change of condition.

3-7-79

District Prod & Drlg Supt.

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(Date)

(Title)