1.	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-114 Effective 1-1-65 S
	ápexco, Inc. Address			
	F. C. Box 2299, Tulsa Oklahoma 74101 Reason(s) for Hing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of:		
	Change in O. ership	Oil Dry Ga Casinghead Gas Conder		
	If change o, ownership give name and address of previous owner	Anacha Corr	pration 2. 0. Box 2299.	Tulsa, Okla. 74101
	DESCRIPTION OF WELL AND LEASE			
. 11	Lease Name	Well No. Pool Name, Including F		Lease No.
	Vature of the second se	Vada renn (Bor	ugh (C) State, Federal or	Fee scate K-5059
	Unit Letter			
	Line of Section 16 Tov	vnship 😳 Range	34:2 , NMPM, Lea	County
m.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	15	
111.	Name of Authorized Transporter of Oll [] or Condensate [] Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)			
	Name of Authorized Transporter of Casinghead Gas 🔝 or Dry Gas 🛄		Address (Give address to which approved copy of this form is to be sent)	
	Warren Setroleum Corpon	ration Unit Sec. Twp. Ege.	Is gas actually connected? When	Oklahoma 74101
	If well produces oil or liquids, give location of tanks.	J 16 95 34E	Yes	5/16/68
	If this production is commingled with that from any other lease or pool, give commingling order number: Not Applicable			
	COMPLETION DATA Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen F	lug Back Same Resty. Diff. Resty.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth F	.B.T.D.
	Elementer (DE GKD BT CD	Name of Producing Formation	Top Oll/Gas Pay 1	ubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Pormution		ubing Depth
	Perforations Depth Casing Shoe			
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		l		
v .	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 allow- able for this depth or be for full 24 hours)			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, a	:tc.)
	Length of Test	Tubing Pressure	Casing Pressure C	Choke Size
		Oil-Bbis.	Water-Bble. C	iga • MCF
	Actual Prod. During Test	011+ 85:5.	HAIDI - DUIDI.	
	GAS WELL Actual Prod. Tost-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	CERTIFICATE OF COMPLIANCE		OIL CONSERVAT	ON 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	
			<u>j</u> 0	ig. Signed by e. D. Ramey
				ist. I, Supv.
	Ama Plana		This form is to be filed in con	pliance with RULE 1104. le for a newly drilled or despened
	Torn L. CLORIC (Signature)		well, this form must be accompanie tests taken on the well in accordance	d by a tabulation of the deviation
	Regional reoduction Admi			ba filled out completely for allow-
	11y 3. 1973			