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Line of Section 34 Township		MOLCH Line o	ni OUO Feet F		
	118			tem the WESE	
ACCIONATION OF TRANSPORTER O		Frange 33	E , MARY,	Les	County
If well produces oil or liquids, give location of tanks. If this production is commingled with that	34	118 33E	s 378 antia ly commedied? Yes we commingling order number:	When	
COMPLETION DATA Designate Type of Completion - ()	Off Wel.	Cas Well N	.ew.we. Morkover Deeper	n Plug Pack Same Re	es'v. Diff. Res'
Date Spudded Date	Compl. Ready to	rod.	Paral Depun	P.E.T.D.	
5-16-68 Elevations (DF, RKB, RT, GR, etc., Name	9-13-68 of Producing For	ration :	10,068	10,057 Tuking Depth	
3804 RBK	Penn		9821	10,024 Depth Casing Shoe	
Perforations 9821-9830, 9884-88, 9951-9				Depth Cdaing ende	
	TUBING,	CASING, AND	SEMENTING RECORD		
· · · · · · · · · · · · · · · · · · ·	CASING & TUE	NG SIZE	DEPTH SET	SACKS CE	MENT
	2-3/4"	:	379*	32 5	
	8-5/3"		3,799	350	
7-7/8"	4-1/2"		10,068	5 7 5	
TEST DATA AND REQUEST FOR AI	LLOWABLE	Test must be after able for this dept	r recovery of total volume of loads or be for full 24 hours)	d oil and must be equal to or	exceed top allo
OIL WELL Date First New Oil Run To Tancs Date	of Test		Producing Method (Flow, pump, g	jas lift, etc.)	
	ng Pressure		Casing Pressure	Choke Size	
Length of Test Tupir			Water - Bbls.	Gas - MCF	
	Bbis.				
Actual Prod. During Test Oil-1	Bbls.				
Actual Prod. During Test Oli-1	Bbis.		Bbis. Condensate/MMCF	Gravity of Condensat	le .
Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Leng			Bbis. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensat	te .
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Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Leng Testing Method (pitot, back pr.) Tubit	th of Test	:-in }	Casing Pressure (Shut-in)	Choke Size	

(Signature) Bill C. Cotner, Owner

(Date)

Jan. 23, 1971

APPROVED	/}	<i>31!</i>		. , 19	
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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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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