DISTRIBUTION SANTA FE		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110		
FILE U.S.G.S.	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL G	Effective 1-1-65		
LAND OFFICE IRANSPORTER GAS		•			
OPERATOR PRORATION OFFICE					
Operator The Maurice L. B	rown Company				
Address P. O. Box 11320, Kansas City, Missouri 64112					
	Reason(s) for filing (Check proper box) Other (Please explain)				
New We!l Recompletion Change in OwnershipXX	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden				
If change of ownership give name and address of previous owner		Box 2299, Tulsa,Qklahoma	74101		
. DESCRIPTION OF WELL AND I	LEASF.	ormation Kind of Lease	Lease No.		
Keohane	1 Vada Penn (Be				
Location Unit Letter N_; 330	0 Feet From The East Line	e and <u>660</u> Feet From Ti	neSouth		
Line of Section 7 Tow	mship 95 Range	34Е , м мрм, Le	ea County		
DESIGNATION OF TRANSPORT	CER OF OIL AND NATURAL GA	S Address (Give address to which approve	ed copy of this form is to be sent)		
Permian Corporat	ion	P. O. Box 1183, Houst Address (Give address to which approve			
Nome of Authorized Transporter of Cas Warren Petroleum		P. O. Box 1589, Tulsa,			
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. N 7 9S 34E	is gas actually connected? When Yes	August 1, 1971		
If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:	Not applicable		
Designate Type of Completio	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
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		
Perforatione		L	Depth Casing Shoe		
· · · · · · · · · · · · · · · · · · ·	T TO THE REPORT OF	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		· · · · · · · · · · · · · · · · · · ·			
	,				
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or OIL WELL 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 life	, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas-MCF		
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (6hnt-in)	Casing Pressure (Shut-in)	Choke Size		
I. CERTIFICATE OF COMPLIAN	CE				
I hereby certify that the rules and a Commission have been complied w	with and that the information given	APPROVED			
above is true and complete to the	. near or wit who wied Ea and perfer				
		This form is to be filed in c	compliance with RULE 1104.		
	Ville	If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
Administrator (Ti	:1e)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.			
October 15, 1975	cie /	Fill out only Sections I. II well name or number, or transport	, III, and VI for changes of owner, er, or other such change of condition.		
12.		H Canada Forma C-104 must	t be filed for each pool in multiply		

Separate Forms C-104 must be filed for eac completed wells.

I	L. UP HIS RECEIVED	_				
	DISTRIBUTION SANTA FE			Form C-104 Supersedes Old C-104 and C-110		
	FILE		FOR ALLOWABLE AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS		
	LAND OFFICE					
	TRANSPORTER GAS					
	OPERATOR					
I .	PRORATION OFFICE					
	Operator	Apexco, Inc.				
	Address					
	F. O. Bo	x 2299, Tulsa, Oklahoma	74101			
	Reason(s) for filing (Check proper bo		Other (Please explain)			
	New Well	Change in Transporter of: Oil Dry Ga	s Operator Name Char	nge		
	Change in Ownership	Casinghead Gas Conden				
	L					
	and address of previous owner	Apache Exploration Corpo	ration, P. O. Box 2299,	, Tulsa, Oklahoma 74101		
1 H	DESCRIPTION OF WELL AND	TEASE				
	Lease Name	Well No. Fool Name, Including Fo		Ecast inter		
	Keohane	1 Vada Penn (Bough "C") State, Feder	al or Fee I'CC		
	Location N	3300 Fast	660	South		
	Unit Letter;;	3300 Feet From The East Line	e and Feet From	The		
	Line of Section 7 T	ownship 93 Bange	34 Е , ммрм, І	ea County		
		ATTRACT AND NATURAL CA	6			
LA.	Name of Authorized Transporter of O	TER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)		
	Permian Corporation		P. O. Box 1183, Hous			
	Name of Authorized Transporter of C		Address (Give address to which appro			
	Warren Hetroleum Gor	Unit Sec. Twp. Rge.	P. O. Box 1589, Tuls Is gas actually connected?	hen /4102		
	If well produces oil or iiquids, give location of tanks.	N 7 9S 34E	Yes	August 1, 1971		
	If this production is commingled w	with that from any other lease or pool,	give commingling order number: N	Not Applicable		
V.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty,		
	Designate Type of Complet	ion - (X)				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
		Name of Producing Formation	Top Oli/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Pointation	Top Off Gus Pay			
	Perforations		<u></u>	Depth Casing Shoe		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
v	TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-		
•	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas 1			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (r low, pump, gas a	iiji, ecc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbla.	Water - Bbls.	Gas-MCF		
	l					
	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		
	teating Markod (prost, out of prot		•			
71.	CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION		
			APPROVED	19		
	Commission have been complied	i regulations of the Oil Conservation with and that the information given				
above is true and complete to the best of my knowledge and belief.			BY	Joe D. Ramer		
			TITLE	Orig. Signed by Joe D. Ramey Dist. I, Supv.		
			This form is to be filed in compliance with RULE 1104.			
	Jom K Jeromy		mail this form must be accomp	wable for a newly drilled or deepened anied by a tabulation of the deviation		
Tom R. Jeronie (Signature) Regional Production Administrator			tests taken on the well in accordance with RULE (1).			
		Fitle)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.			
July 3, 1973			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.			
	(1	Date)	Separate Forms C-104 mu	st be filed for each pool in multiply		
		, and a second	completed wells.			