F	NO. OF COPIES RECEIVED	• • • • • • • • •		Form C-104 Supersedes Old C-104 and C-110	
	ILE     REQUEST FOR ALLOWABLE     Supersedes Uld C-IO4 and C       ILE     AND       J.S.G.S.     AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS       LAND OFFICE     OIL       IRANSPORTER     OIL			Effective 1-1-65	
1.	DPERATOR DPE				
	PETRO GRANDE, INCORPORATED				
	4219 Sigma Road,	4219 Sigma Road, Dallas, Texas 75240			
	Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership X	Change in Transporter of: Oil Dry Gas Casinghead Gas Condensa	Change of ownersh effective Decembe		
	If change of ownership give name and address of previous owner	Eugene E. Nearburg, 4:	219 Sigma Road, Dallas,	Texas 75240	
н.	DESCRIPTION OF WELL AND L	EASE Well No.; Pool Name, Including For	mation Kind of Lease	Lease No.	
	Lease Name Kirkpatrick – Feder			orFee Federal NM-041698-A	
	1	Feet From The East Line	and Feet From Th	south	
	Line of Section 11 Town	nship 8-S Range	<u>)/-с , мем,</u>	evelt County	
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which opport	4	
	Mobil Oil Company		P. O. Box 900, Dallas, Address (Give address to which approve	Texas 75221 ed copy of this form is to be sent)	
	Cities Service Oil Com	ipany	Bartlesville, Oklahoma		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ce. P 31 8S 37E	Is gas actually connected? When YES	April 17, 1964	
	If this production is commingled wit	h that from any other lease or pool, g	give commingling order number:		
JV.	Designate Type of Completio	Our went das went	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completion	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gcs Pay	Tubing Depth	
	Perforations	Perforations Depth Casing Shoe			
			CEMENTING RECORD	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		
				and must be equal to or exceed top allow-	
V	. TEST DATA AND REQUEST F	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 allowable for this depth or be for full 24 hours)         OIL WELL       Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (r tow, pump, gos r)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Pred. During Test	011-3b1.	Water - Bbls.	Gas-MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bble. Condenacte/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shnt-in )	Casing Pressure (Shut-in)	Chox• Siz•	
v	I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and regulations of the oil Conservation		APPROVED		
	I hereby certify that the rules and requisitions of the origination given Commission have been complied with and that the information given above is true and complete to the heat of my knowledge and belief.		BY///////		
	h. 14 // .		TITLE OIL & GAS INSTERIOR		
	Alin V. Helenak		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend If this is a request for allowable down a tabulation of the deviation		
	(Sienature) Eddie J. Gelwick Production Superintendent (Title) December 25, 1972 (Date)		<ul> <li>well, this form must be accompanied by a tabality in the section of the well in accordance with AULE 111.</li> <li>All sections of this form must be filled out completely for allowable on new and recompleted wells.</li> <li>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.</li> <li>Separate Forms C-104 must be filed for each pool in multiply</li> </ul>		
			completed wells.		