ANTA FE	REQU	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65	
RANSPORTER OIL GAS PERATOR RORATION OFFICE					
Flag-Redfern Oil (Company				
P.O. Box 11050 coson(s) for filing (Check proper w Well ecompletion	Change in Transporter of:)2 Other (Pleas	e cxplain)		
ange in Ownership	Casinghead Gas C	Condensate			
change of ownership give nam .a address of previous owner_	.e				
SCRIPTION OF WELL AN	VD LEASE Well No. Pool Name, Includ	Ung Engellen			
Southard 26	1 Tom-Tom (S	-	Kind of Lease State, Federal or Fee	Lease No.	
Unit Letter;;	660 Feel From The North	Line and 660	Feet From The	West	
Line of Section 26	Township 7-S Range	0.1		- County	
ESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL		·	- County	
Tesoro Crude Oil Company		Address (Give address 8700 Tesoro D Address (Give address	Address (Give address to which approved copy of this form is to be sent) 8700 Tesoro Drive, San Antonio, TX 78286 Address (Give address to which approved copy of this form is to be sent) P.O. Box 300, Tulsa, OK 74102		
(well produces oil or liquids, the location of tanks.	Unit Sec. Twp. Pge D 26 7-S 3	-E yes November, 1979			
	with that from any other lease or p	,, _,			
Distribution DATA Designate Type of Complete	etion — (X)	ell New Well Workover	Deepen Plug Ba	ick Same Resty. Diff. Resty.	
ate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D	, i i i	
.avations (DF, RKB, RT, GR, etc	.; Name of Producing Formation	Top O!1/Gas Pay	Tubing I	Depth	
orforations			Depth C	asing Shoe	
		AND CEMENTING RECOR			
HOLE SIZE	CASING & TUBING SIZE			SACKS CEMENT	
			<u>.</u>		
LST DATA AND REQUEST 11. WELL ate First New Oll Run To Tanks		be after recovery of total volu aix depth or be for full 24 hour. Producing Method (Flow	3)	be equal to or exceed top allow.	
ength of Test	Tubing Pressure	Casing Pressure	Choke S	lze	
ctual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas - MC	F	
·	<u> </u>				
AS WELL citual Prod. Tost-MCF/D	Length of Teat	Bbls. Condensate/MMC	F Gravity	of Condensate	
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut			
		Coning Pressure (Baut	-in) Choke Si	zn	
CRTIFICATE OF COMPLIA	INCE		CONSERVATION C	OMMISSION	
inmission have been complied	nd regulations of the Oil Conservat d with and that the information giv the best of my knowledge and beli	ven	UL - 6 1984 UNAL SIGNED BY JER DISTRICT I SUPERVI		
Judy Berlen (Signature) Production Clerk (Tille) July 2, 1984 (Date)		If this is a req well, this form musi- testa taken on the All sections of able on new and re Fill out only s well name or numbe	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 testa taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- able 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		
		Separate Form	1 C-104 must be filed	for each pool in multiply	