NO. OF COPILY MELSIVEO DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OF FICE I RANSPORTER OPEF/TOR PROFATION OF FICE Operator Natomas North Americ Address 1121 First Place, Tu Reason(s) for filing (Check proper box) New We!! Recompletion	A AUTHORIZATION TO TRANS a, Inc.	R ALLOWABLE ND PORT OIL AND NATURAL GA		
Change in Ownership <u>name</u> If change of <u>xxxxxxx</u> give name	Casinghead Gas Condensa Apexco, Inc., 1121 First		.03	
and address of previous dwhet				
II. DESCRIPTION OF WELL AND L		State Federal		
Maljamar North Unit	4 West Kemnitz - I			
Unit Letter <u>E</u> ; <u>218</u>	0Feet From The <u>North_Line</u>	and660Feet From T	he <u>West</u>	
	nship 165. Range 3	33Е, ммрм,	LeaCounty	
	TER OF OUL AND NATURAL GAS		the form is to be sent	
None of Authorized Transporter of Cit Line of Contentions			77001	
Permian Corporation	Permian Corporation		BOX 1183, MOUSLUIL approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum	Co.	Phillips Bldg. Bartlesville, UK		
If well produces oil or liquids, give location of tanks.	G 31 16S 33E	Yes	_1-5=65	
If this production is commingled wit	h that from any other lease or pool, g	vive commingling order number:	Not applicable	
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Dill. Res'v.	
Designate Type of Completic	Date Compl. Ready to Prod.	Totai Depth	P.B.T.D.	
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Foundation		Depth Casing Shoe	
Perforations				
	TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT	
HOLESIZE	CASING & TUBING SIZE	DEFTHICK		
		l	Line or exceed ton allow	
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a) able for this de		l and must be equal to or exceed top allou-	
OIL WFIL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas)	lift, etc.)	
	Tubing Pressure	Casing Pressure	Choke Size	
Length of Test		Water - Bbla.	Gae - MCF	
Actual Prod. During Test	Oll-Bhis.			
GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate	
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Tealing Method (pitot, back pr.)	100114 LIBER (0000 ***)		ATION COMMISSION	
VI. CERTIFICATE OF COMPLIAN	NCE	MAR 11	978 19	
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 Original by		
		BY Les Clements Oil & Gas Insp.		
		TITLE		
PD 22		This form is to be filed I	n compliance with RULE 1104. Sowable for a newly drilled or deepens Sealed by a tabulation of the deviation	
(Stanutura)		well, this form must be accou	With NULE 111.	
Division Production Manager		All sections of this from must be filled out that		
January 1, 1978	Title)	Fill out only Sections I	Fill out only Sections I. II. III, and VI for change of condition	
January 1, 1970 (Date)		well name or number, or this porter of the filed for each pool in multip Separate Forms C-364 must be filed for each pool in multip		

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