	Address Corporation					_
	Reason(s) for filing (Check proper b	Mexico pox)	Other (Please exp	lain)		
	New Well	Change in Transporter of:	_ To show ga	s transpor	ter	
	Recompletion	Oil Dry Go	as		-	
	Change in Ownership	Casinghead Gas Conde	ensate			
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AN	D LEASE	-			
	Lease Name		ame, Including Formation	Kind	of Lease	
	Beatherstone Federal	L Mort	on Lower Wolfeanp	State	, Federal or Fee	Padaval.
	Location		•			
	Unit Letter;;	66 Feet From The North Lin	ne and <b>55</b> . F	eet From The	Rost	
					Past	
		Feet From The <b>North</b> Lin			Rest	County
III.	Line of Section 12 , 7  DESIGNATION OF TRANSPO	Township 15_8 Range 3	AS	Les		
III.	Line of Section 12 ,  DESIGNATION OF TRANSPO  Name of Authorized Transporter of	RTER OF OIL AND NATURAL GA	AS Address (Give address to wh	Les	y of this form is to	be sent)
III.	Line of Section 12 , 7  DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	AS	Les	y of this form is to	be sent)
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III.	DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Name of Authorized Transporter of  Name of Authorized Transporter of	RTER OF OIL AND NATURAL GA OIL or Condensate  Casinghead Gas or Dry Gas	AS Address (Give address to whe Address (Give address to whe Address to whe Address to whe Box 1589. Thise, Is gas actually connected?	venue Inh lich approved cop Oklaheme When	y of this form is to	be sent)
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Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pur	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Cheke Size		
Actual Prod. During Test	Oil - Bbls.	Wgter - Bbls.	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 Casing Pressure Choke Sine

APPROVED.

BY\_

TITLE .

## VI. CERTIFICATE OF COMPLIANCE

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.

ORIGINAL SIGNED BY

(Signature)

Area Production Manager

August 8, 1966

This form is to be filed in compliance with RULE 1104.

OIL CONSERVATION COMMISSION

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 weils.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporten or other such change of condition.

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