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	DISTRIBUTION			Form C-104 Supersedes Old C-104 and C-110
	FILE	REQUEST	FOR ALLOWABLE	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL (GAS
	TRANSPORTER OIL	-		
	OPERATOR			
I.	PRORATION OFFICE		CASINGHEAD GAS	
	Mesa Petroleum Co.		FLARRE AFTER UNLESS AN EXCEP	
	904 Gihls Tower We Reason(s) for filing (Check proper bo		Other (Please explain)	110N 20 K-4870
	New Well	Change in Transporter of:		
	Recompletion	Oil Dry Go		gas connection date.
	Change in Ownership	Casinghead Gas Conder		
	If change of ownership give name and address of previous owner		BEEN PLACED IN THE POOL	2 - 124
Π.	DESCRIPTION OF WELL AND	LEASE NOTIFY THIS O	FFICE. X	Kind of Lease
	Lease Name West Knowles		me, Including Formation t Knowles, Drinkard	State, Federal or Fee Fee
	Location			<u> </u>
	Unit Letter F ; 1	880 Feet From The <u>North</u> Lir	ne and <u>1880</u> Feet From '	The West
	Line of Section 35 , To	ownship 16S Range	37Е , ммрм, Le	County
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which appro	ved copy of this form is to be sent)
	Name of Authorized Transporter of C Koch Oil Company		P.O. Box 1558 Brecken	ridge Texas 76024
	Name of Authorized Transporter of C		Address (Give address to which appro	ved copy of this form is to be sent)
	Phillips Petroleum	CO. Unit Sec. Twp Rge.	311 Phillips Building. Is gas actually connected?	
	If well produces oil or liquids, give location of tanks.	L 35 16 <u>S 37</u> E	Yes	8-10-75
		with that from any other lease or pool,	give commingling order number:	
1 V .	COMPLETION DATA Designate Type of Complet:	ion (X) Oil Well Gas Well	New Well Workover Deepar.	Plug Back Same Res'v, Diff. Res'v.
	Designate Type of Complet.	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.
	7-1-75	8-7-75	8640'	8465'
	Pool West Knowles	Name of Producing Formation Drinkard	Top Oil/Gas Pay 8286'	Tubing Depth 82521
	Perforations		6260	Depth Casing Shoe
	8297'-8308', 8312'-8332', 8336'-8374' TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	17 1/2	13 3/8	348	375
	11	8 5/8	4200	400
	7 7/8	4 1/2	8640	180 + 200
v.	TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil	and must be equal to or exceed top allow-
	OIL WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, jas li	ft, etc.)
	8-7-75	8-11-75	Flowing	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	17¼ hrs. Actual Prod. During Test	<u> </u>	Pkr Water - Bbls.	32/64 Gas-MCF
	240 BO + 173 MCF	334		211
	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 Size
VI.	CERTIFICATE OF COMPLIAN	NCE	OIL CONSERVA	TION, COMMISSION
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED 19, 19	
	Commission have been complied	with and that the information given he best of my knowledge and belief.	BY John W.	Kunyan
			TITLE	
			This form is to be filed in compliance with RULE 1104.	
	Michael P. Houston		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	
	Division Engineer		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
	(Title)		able on new and recompleted wells.	
	August 14, 1975		Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.	
4	NMOLC Fartness		Separate Forms C-104 mus completed wells.	t be filed for each pool in multiply
(<u>)</u> ,	(1 + 1) + (1 +	1. Fahr Marian		