NO. OF COPIES RECT	EIVED			
DISTRIBUTIO	I			
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OF	PRORATION OFFICE			

- - -	DISTRIBUTION SANTA FE FILE		ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65					
	U.S.G.S. LAND OFFICE IRANSPORTER GAS GAS	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL GA	AS .					
.	PRORATION OFFICE								
*		1. 0							
Reason(s) for filing (Check proper box) Operator Roch Exploration Company No. Box 2256, Wichita, Ks. 67201 Other (Please explain)									
	New We!l Recompletion	Change in Transporter of: Oil Dry Gas							
l	Change in Ownership	Casinghead Gas Condens							
1	If change of ownership give name Rand address of previous owner	lock Island Oil & A	Refining Co. (Re-name	ed Koch Expl. Co.)					
II. ļ	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease								
	Bridges State 1 Vacuum-Grayburg S.A. State, Federal or Fee State								
	Location		and 1980 Feet From Th	W					
	Unit Letter N : 66								
	Line of Section 3 Tow	nship /7S Range	34 E , NMPM,	Lea County					
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S	Leave debit form in to be contil					
	Name of Authorized Transporter of Oll	or Condensate	Address (Give undress to mitch approve						
	Mobil Oil Corp Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	P.O. Box 900, Dallas Address (Give address to which approve	ed copy of this form is to be sent)					
		Unit Sec. Twp. Rge.	Is gas actually connected? When						
	If well produces oil or liquids, give location of tanks.	N 3 175 34E							
1	If this production is commingled with	h that from any other lease or pool, a	give commingling order number:						
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
	Designate Type of Completio	n - (A) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	Date Spudded	Date Compi. Reday to 1164.							
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
	Perforations			Depth Casing Shoe					
		THRING CASING AND	CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
			for a second value of land oil of	ind must be equal to or exceed top allow-					
V.	TEST DATA AND REQUEST FOOL WELL	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas life						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas 15)						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size					
		Oil-Bbls.	Water-Bbls.	Gas-MCF					
	Actual Prod. During Test								
	Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate					
		(2) (2)	Casing Pressure (Shut-in)	Choke Size					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)							
٧ī.	ERTIFICATE OF COMPLIANCE		(1)	TION COMMISSION					
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED JUIN	19					
	I hereby certify that the rules and Commission have been complied to								
	above is true and complete to the	e best of my knowledge and belief.	BYGeolo						
		Λ Λ	This form is to be filed in	compliance with RULE 1104.					
	R.L. Keth	Chun	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						

R.L. Sethbun
Chief Production Clerk
T (Title)

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APPROVED Tohn	ごし す			
Geolo				
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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 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