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I completed wells.		Separate Forms C-104 must be filed for each pool in multip completed wells.



Form C-104 Revised 10-01-78 Format 06-01-83 Page 2

IV. COMPLETION DATA

Designate Type of Completi	on - (X)	OII Well	'Gas Well I I	'New Well I I	Workover I	'Deepen I I	I I Plug Back	i Same Hesiv.	1 1
Date Spudded		I. Ready to F	Prod.	Total Dept	h		P.B.T.D.	<u></u>	• +-• •
Elevations (DF, RKB, RT, GR, etc.,	Name of Pr	oducing For	mation	Top Oil/Gas Pay			Tubing Depth		
Perforationa						Depth Casing Shoe			
		TUBING,	CASING, AN	D CEMENT	ING RECOR	D			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
				_					

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow OIL WELL able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pum)	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbie.	Water - Bble.	Gas - MCF		

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitol, back pr.)	Tubing Pressure (shut-in)	Coming Pressure (Shut-im)	Choke Size
		<u> </u>	<u> </u>

JUL 2.9 1985