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NO. OF COPIES RECEIVED			
DISTRIBUTION SANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-
FILE	E REQUEST	AND	Effective 1-1-65
U.S.G.S.  LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	ĄL ĠAS
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE Operator	WOLFSON OIL CO	arma NV	
Address			Dalles Tayes
		National Bank Tower,	
Reason(s) for filing (Check proper box	Change in Transporter of:	Office of rease explainty	
Hecompletion	ori 🖺 Dry G	as [	
Thange in Ewnership	Casinghead Gas 🗶 — — — — — — — — — — — — — — — — — —	ensate	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		
Lease Name  F. J. Danglade	We vs : 'Co \	ame, Including Formation Nebry, Blinebry	Kind of Lease State, Rederal or Ree  Fee
Lecation			
Unit Letter B 660	Heet Hrom Tile North	ine and Peet 1	Trom The
24	ownship <b>22-S</b> Hange	37EL	<b>.ea</b> County
. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS	
	or Continuente	Address (Give address to which	approved copy of this form is to be sent)
	1 🔼 or Convensate 🔃	Midland, Texas	approved copy of this form is to be sent)
SHELL PIPE LINE COMPAN	r Consensate  I	Midland, Texas  Address (Give address to which	approved copy of this form is to be sent)
SMELL PIPE LINE COMPAN Name of Authorized Transporter of Co Warren Petroleum Compa	r Convensate  r singhedi Bas [v] or Cry Gas [	Midland, Texas  Address (Give address to which P. O. Box 1589, Tu  Is gas returily removed:	approved copy of this form is to be sent)  1188, Okahoma 74102  When
Name of Authorized Transporter of Co.  Warren Petroleum Compa  If well produces oil or liquida, give location of traks.	or Convensate  IX  Isinghedi Das [X] or Dry Gas []  IN  IN  Vnit Sec. Tws. Rige.  B 24 285 378	Midland, Texas  Address (Give address to which P. O. Box 1589, Tu  Is gas netually remocted?  Yes	approved copy of this form is to be sent)  11sa, Okahoma 74102  When  unknown
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SHELL PIPE LINE COMPAN  Name of Authorized Transporter of Co Warren Petroleum Compa  If well produces off or liquida, give location of tanks.  If this production is commingled way. COMPLETION DATA  Designate Type of Completion Date Spudded  Frool  HOLE SIZE  W. TEST DATA AND REQUEST OIL WELL  Date First New oil Bun To Tanks  Length of Test	Isinghedi Bas   or Bry Gas   nay  Isinghedi Bas   or Bry Gas   nay  Init   Sec.   Twp.   Rige.    B   24   235   378    ith that from any other lease or pool    ion - (X)   Date Compl. Really to Fred.      Name of Freducina Formation      TUBING, CASING, A     CASING & TUBING SIZE      FOR ALLOWABLE   /Test must be able for this     Date of Test     Tubing Pressure	Midland, Texas  Address (Give address to which P. O. Box 1589, Tu  Is gas naturally remorate?  Yes  In give commingling order number    New Well   Werking   Deeper    Total Depti.    Top CE Gas Flay    DEPTH SET    after recovery of total volume of loadepth or be for full 24 hours)    Producing Metha i (Flow, pump.   Casing Pressure	approved copy of this form is to be sent)  ilsa, Okahoma 74102  When unknown  illustrick Same Resty, Diff. Rose  illustri

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 beket.

(Title)

(Date)

J. L. Crutchfield, Office Manager

Tubing Pressure

Testing Method (pitot, back pr.)

October 4, 1966

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

Casing Pressure

BY.

APPROVED\_

TITLE \_

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

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 wells.

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.

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