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COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v.	Diff. Res
Designate Type of Completion - (X)	! !
P.B.T.D.	
Date Spudded Date Compl. Ready to Floa.	
Elevations (DF, RKB, RT, GR, etc.; Name of Producing Formation Top Oil/Gas Pay	
Elevations (Dr., Mad, Mr., on, etc.)	
Perforations Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMEN	<u>1</u>
HOLE SIZE	
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed the able for this depth or be for full 24 hours)	eed top all
OIL WELL OR THE Producing Method (Flow, pump, gas lift, etc.)	
Date First New Oil Run To Tanks Date of Test	
Contact Procesure Choke Size	
Length of Test Tubing Pressure Casing Pressure Choke Size	
Water-Bbls. Gas-MCF	
Actual Prod. During Test Oil-Bbls.	
GAS WELL Bbls. Condensate/MMCF Gravity of Condensate	
Actual Prod. Test-MCF/D Length of Test	
Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in)	
OIL CONSERVATION COMMISSION	
I. CERTIFICATE OF COMPLIANCE	
$\Lambda \bowtie \Lambda $	9
I hereby certify that the rules and regulations of the Oil Conservation given	
Commission have been compiled with and the beginning and belief. By	
DISTRICT I SUPERVISOR	
TITLE	
This form is to be filed in compliance with RULE If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of well, this form must be accordance with RULE 111.	4 1 0 4
If this is a request for allowable for a newly drilled	1104. Lordecor
(Signature) If this is a request for allowable lot well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111.	d or deepe the devia

Engrg. Tech. Spec.

4-6-83

(Title)

(Date)

 APPROVED APPRIL 1 19833
DESTRICT I SUPERVISOR
TITLE

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 completed wells.

APR 8 1983

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