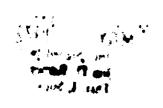
FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-101 and C-110 Elfective 1-1-65	
U.S.G.S.	AUTHC _ATION TO TRA	AND INSPORT OIL AND NAT AL G	AS	
INANSPORTER OIL				
GAS GAS	]			
PRORATION OFFICE	1			
Tenne	co Oil COMP	'ANY		
Suite 1700 L	in coln Tower Bldg.	- Derver Colo	80203	
Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)		
Recompletion	Oll Dry Ga	一日 に / /っった ツク	4/1/2	
If change of ownership give name	Casinghead Gas Conder	isate		
and address of previous owner	I DACE		E 0989-1	
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	n 1		
STATE Monsan	0216   YADUCA -	Delaware		
Unit Letter;/E	250 Feet From The South 1 in	te and <u>•23/0</u> Feet From T	he West	
Line of Section / To	wnship 25-5 Range	32 E. NMPM, Se	A County	
	TER OF OIL AND NATURAL GA	\S		
Name of Authorized Transporter of Oil Western CRUDE		Box 1142 - Midlan	d Texas	
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which approv	ed dopy of this form s to be sent)	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n	
This production is commingled wi	ith that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.	
Designate Type of Completi	on – (X)  Date Compl. Ready to Prod.	Total Depth .	P.B.T.D:	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Cas Pay	Tubing Depth	
Perforations .			Depth Casing Shoe	
		CEMENTING RECORD	CAOVA OFMENT	
HOLE SIZE	CASING & TUBING SIZE	, DEPTH SET	SACKS CEMENT	
TEST DATA AND REQUEST FOIL WELL	able for this de	epth or be for full 24 hours)	and must be equal to or exceed top allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li)	· ·	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas-MCF	
•			•	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	I uping Pieseme (Sudc-In)			
CERTIFICATE OF COMPLIAN	CE	1	TION COMMISSION	
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 belief.		APPROVED MAY 8 1972 , 19 Orig. Signed by		
		BY Jos D. Reme? Dist. L. Supv.		
		TITLE		
5. U. Low		The state in a sequest for allow	vable for a newly drilled or deepened	
2). Roduction Clark.  3/3/7/ (Guile)		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 transpor
			•	if completed wells.



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OIL CONSERVATION COMM.