OKLAHOMA CORPORATION COMMISSION OIL GAS CONSERVATION DIVISION P.O. BOX 52000, PRODUCTION DEPT. OKLAHOMA CITY, OKLAHOMA 73152-2000

Form 1007A Rev. 2013

		LAHOMA	52000, PRODUC CITY, OKLAHO IONE (405) 521	MA 73152-2000			
Operator Number		\neg	IONE (403) 321	-2300			
Operator Name							
Operator Name							
		MINIMUN	I GAS WELL	REPORT	TEST YEAR:		
	_		GAS WELLS C		I LAIN.		
API NUMBER	WELL NAME	WELL #	SEC-TWP-RGE (SURFACE)	PRODUCING FORMATION	SHUT-IN PRESSURE	DATE TAKEN	
					+		
					_		
					+		
If you'll be pasting	data into this form, the formatting	will conform	to your source file; e	nsure your source file is formatted the w	vay you want it to c	display here.	
which was prepa	ave knowledge of the cont	ents of this pervision a	s report and am and direction, wi	FINAL page only. authorized by my organization th the data and facts stated he			
SIGNATURE			-	TITLE			
DATE PHONE NUMBER				E-MAIL ADDRESS			

(INSERT ADDITIONAL PAGES AS NEEDED)

PAGE _____ OF ____