

**APPLICATION FOR TRANSFER OF  
 ALLOWABLE — CASING LEAK WELL  
 EAST TEXAS FIELD**

1. Operator name exactly as shown on P-5, Organization Report	2. Lease name exactly as shown on Proration Schedule		
3. Address including city, state, and zip code	4. Check if an amended application <input type="checkbox"/>	5. RRC lease no.	6. Well no.
	7. API no. 42-	8. Last daily assigned allowable bbl/day	
9. Location (county, survey, and abstract no.)		10. Completion date	
11. Evidence of leak OR, for an amended application, proposed changes and reason for changes			

**DESIGNATED WELL DATA**

<b>Well No. 1</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. Current daily allowable bbl/day	

<b>Well No. 2</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. Current daily allowable bbl/day	

<b>Well No. 3</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. Current daily allowable bbl/day	

<b>Well No. 4</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. Current daily allowable bbl/day	

**RECEIVING WELL DATA**

<b>Well No. 1</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. County	7. Daily % water produced %
8. Is this well (a) less than 330 feet from a lease line, (b) off lease from the casing leak well, and/or (c) under a different operator than the casing leak well? Check as applicable. See Instructions 2 and 3.		NO <input type="checkbox"/>	(a) <input type="checkbox"/>
9. Current daily allowable		(b) <input type="checkbox"/>	(c) <input type="checkbox"/>
10. Is this well receiving transfer allowables from other casing leak wells? If YES, complete the following for each transfer. Note: Limit of 6 bbl/calendar day total.		YES <input type="checkbox"/>	NO <input type="checkbox"/>
11. Transfer allowable, this application		bbl/day	
OPERATOR	LEASE NAME	RRC LEASE NO.	WELL NO. ALLOWABLE TRANSFER (bbl/day)

**RECEIVING WELL DATA, Continued**

<b>Well No. 2</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. County	7. Daily % water produced %
8. Is this well (a) less than 330 feet from a lease line, (b) off lease from the casing leak well, and/or (c) under a different operator than the casing leak well? Check as applicable. See Instructions 2 and 3.		9. Current daily allowable bbl/day	
10. Is this well receiving transfer allowables from other casing leak wells? If YES, complete the following for each transfer. Note: Limit of 6 bbl/calendar day total.		11. Transfer allowable, this application bbl/day	
OPERATOR	LEASE NAME	RRC LEASE NO.	WELL NO. ALLOWABLE TRANSFER (bbl/day)

<b>Well No. 3</b>			
1. Operator	2. Distance and direction from casing leak well	3. RRC lease no.	4. Well no.
5. Lease name exactly as shown on Proration Schedule		6. County	7. Daily % water produced %
8. Is this well (a) less than 330 feet from a lease line, (b) off lease from the casing leak well, and/or (c) under a different operator than the casing leak well? Check as applicable. See Instructions 2 and 3.		9. Current daily allowable bbl/day	
10. Is this well receiving transfer allowables from other casing leak wells? If YES, complete the following for each transfer. Note: Limit of 6 bbl/calendar day total.		11. Transfer allowable, this application bbl/day	
OPERATOR	LEASE NAME	RRC LEASE NO.	WELL NO. ALLOWABLE TRANSFER (bbl/day)

I certify that I have the legal right to operate and produce oil from the tract on which the casing leak well is located and the owners of royalty interests on that tract are entitled to receive such royalty or production accruing to the transferred allowable. I further certify that all such royalty owners as well as affected operators and affected unleased mineral owners have been notified as required in Special Order No. 6-56,338, as amended 7/7/86.

SIGNATURE \_\_\_\_\_  
 NAME (Print) \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
 TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Kilgore District Office

**RRC USE ONLY**

Austin

Date casing leak well tested _____	<input type="checkbox"/> Approved      Engineer: _____ <input type="checkbox"/> Not approved      Signature _____
Witnessed by _____	
Date casing leak well plugged _____	REMARKS: _____
District Director or Representative: _____	
Signature _____	
Date _____	Date _____

**Instructions**

Reference: Special Order No. 6-56,338, effective 9/1/66, amended 7/7/86

- File the original and one copy of this form and required attachments with the Commission's Kilgore district office (619 Henderson Blvd, Kilgore, TX 75662-5998).  
 ATTACHMENTS (in duplicate)
  - Plat, certified by a licensed surveyor or engineer (registered in Texas), of all subject leases. All wells on each must be shown with the subject wells and distances between them clearly identified.
  - Recent W-10 retest of the receiving well(s) if the current proration schedule does not indicate a capability sufficient to produce at a level which includes all transfer allowables.
  - Additional attachments as required in Nos. 2 and 3.
- If any receiving well is less than 330 feet from a lease or property line, send notice of this application to all affected operators of wells and affected unleased mineral interest owners on leases offsetting the receiving well lease.
- If any receiving well is off-lease from the casing leak well or under a different operator, send notice of this application to (a) all royalty owners of the casing leak well lease, and (b) all affected operators of wells and affected unleased mineral interest owners on leases offsetting BOTH the casing leak well lease AND the receiving well lease.