## RAILROAD COMMISSION OF TEXAS OIL AND GAS DIVISION

Form W-4 (Rev. 8-27-69)

## APPLICATION FOR MULTIPLE COMPLETION

1.	Field Name	2. RRC District						
3.	Operator	4. County						
5.	. Lease Name(s) and RRC Lease Number(s)			6. Well Number				
7.	Are the reservoirs herein requested to be used for completion presently recognized by the Commission as separate reservoirs as the result of prior applications for permission to multiply complete? If answer to this question is "NO", ALL OPERATORS IN THE FIELD MUST BE FURNISHED A COPY OF THIS APPLICATION.							
8,	. Identify one instance (operator, lease, well number) wherein the Commission granted a multiple completion including these same zones in this field.							
9.	MULTIPLE COMPLETION DATA		nicentri da impiratori presidenti di uno del estendente do de un esta di ampirat de una si presidenti su altima					
		DUAL COM	PLETION		3			
		1st (Upper) Zone	2nd Zone	3rd Zone	4th Zone			
(a)	RRC Alphabetic Code Designation (Multiple Well Completion Designation — See Instructions on reverse side.)				·			
(b)	Name of Reservoir (If reservoir name is shown on proration schedule, use that name.)							
(c)	Type of Production (oil or gas) (If used for injection, state type fluid injected.)							
(d)	Depth to Top of Pay Section (ft.)							
(e)	Depth to Bottom of Pay Section (ft.)							
(f)	Producing Interval(s) (top to bottom)							
10.	10. The following supporting evidence is attached: (Please answer YES or NO.)  (a) Electrical Log with tops and bottoms of producing zones and perforated intervals shown and marked  (b) Packer Setting Report and/or Cementing Report  (c) Communication or Packer Leakage Test (with Recorder Charts)  (d) Sketch of Multiple Completion Installation							
11. List below or on an attached sheet ALL OFFSET OPERATORS to the lease on which this well is located together with the mailing address.								
		A CONTRACTOR OF THE PROPERTY O			the state of the s			
	(a) Attach Letters of Waiver from Offset	Operators, OR						
	(b) Furnish each Offset Operator with a		orm and give date furni	shed	***************************************			

12. Is this a regular location with respect to all zones? (yes	ог по)							
13. If the answer to Item 12 is "NO", has a Rule 37 Hearing been held on zones affected by such rule?  (yes or no)								
14. Is the fluid produced from any of these zones conducive to corrosion to the extent that any resulting corrosion will damage tubing or casing?								
15. Remarks:								
	en de la composition de la composition La composition de la							
I declare under penalties prescribed in Sec. 91.143. Texas Natu	aral Resources Code, that I am authorized to make this report, that this							
report was prepared by me or under my supervision and direction to the best of my knowledge.	and that data and facts stated therein are true, correct, and complete,							
Date	Signature							
	Signature							
Operator	Name of Person (type or print)							
Street Address or P.O. Box	Title of Person							
Classic	Telephone:							
City, State Zip Code	Area Code							
	Area Code							
- INSTR  1. File the <u>original</u> and <u>one copy</u> of this form in the Railroad	UCTIONS —							

- - (a) Packer Setting Report (Form W-5) where applicable and/or Cementing Report (Form W-15).
  - (b) Communication or Packer Leakage Test (Form W-6).

CODE

- (c) Sketch of Multiple Completion Installation (Form W-4A).
- (d) Letters of Waiver from offset operators, or evidence that notice of the application to multicomplete was given to said operators.
- (e) Electrical Log showing subsurface location of the separate reservoirs claimed.
- 2. The required attachments in (a), (b), and (c) above shall be filed in duplicate.
- 3. This form may be used for a dual, triple, or quadruple completion. If more than four zones are involved, use this form and add an attached sheet.
- 4. If any completion is to be used for injection, separate permission to inject must be obtained from the Commission.
- 5. For Item 9 (a), the following Multiple Well Completion Designation shall be used.

RRC ALPHABETIC CODE DESIGNATION		FORMERLY USE DESIGNATION	FORMERLY USED DESIGNATION	
	C	C		
	Т			
	U			
	<u>L</u> .,	LT or LC		
	M	MT or MC		
	P	UMT or UMC		
	Q	LMT or LMC		
	D.	S-1-C, S-1 or W or W-C		
	E	S-1-T or W-T		
	F	S-2-C, S-2 or X or X-C		
	G	S-2-T or X-T		
	Н	S-3-C, S-3 or Y or Y-C		
	I	S-3-T or Y-T		
	J	S-4-C, S-4 or Z or Z-C		
	<b>K</b>			
	N	S-5-C or S-5		
	O	S-5-T		