			KE2	EF	<b>KVU</b>	IR IN	-OF					<b>JKI</b>	(5	RI)	
1. 8. FI		FIELD NAME		50. RESERVOIR NAME				26. CONTACT NAME							
	1						11. OPERAT			OR NAME and ADDRESS (Submitting Office)					
117. DRIVE MECH. 10. MMS OPE			ERATOR NO. 118. DIS			SCOVERY YEAR									
121. TYPE OF REQUEST 89. ATT			ACHMENTS PER			122. RESERVOIR T					123. RESERVOIR CI				
		30 CFR 250.1102				OPERATOR	REQ.	MMS		OPERATOR REQ.			MMS		
REVISION ANNUAL REVIEW		1		1								/=			
	vv														
			ER			GAS CAP		GAS CAP							
VOLUMETRIC DATA															
124. Upper Ø Cut-off				Uppe Cut-o		127. Lower k Cut-off		128. G/O Interface		129	129. W/O Interface		130. G/W Interface		
1 1	32. A	1	.33. V		134. \		135. H		136. h		137. <del> </del>	4	13	38. h	
g	g o		0			g	0		0		g		g		
139. Ø 140. S				143. B		144. E			145. N	15. N		146. G			
e <sup>w</sup>		g	0		oi			gi							
147. K 148. K h v	149	. AVG We	ell Depth	150.	R 1 io	151. R 1	52. R N io		153.	R G <sup>ig</sup>	-	154. N ( p	2)/N	155. G (2)/G	
FLUID ANALYSIS DATA															
156. API @ 60 F	157	7. SG		158	3.R		159. µ		1	L60. μ		1	61. T		
			si					oi		0				avg	
		DATE 164. P		P ws		165. P DATE		166. Р ь		167. P d			168. Datum Depth		
	PRODUCTION DATA														
169. GOR 17	171. WOR 172.					No. of Injection 174 Completions			4. No. of Abandoned Completions		175. No. of Active Completions				
.,		77. N (1) DATE		178. G (1)				.79. G (1) DATE		180. W (1)		1		81. W (1) DATE	
р		р		р				p		р			р		
		3. N (2) DA p	λΤΕ	184	184. G (2) p		185. G (2) DATE p			186. W (2)		187. W (2) DATE		(2) DATE	
115. ACTIVE COMPLETIONS IN RESERVOIR (Continue in Remarks or attach an additional sheet if necessary.)															
LEASE NO.	WELL	NAME		API V	VELL NO	).	LEA	SE NO.	WE	LL NAME		AP	I WELL	. NO.	
1.							5.								
2.							6.								
3.							7.								
4.							8.								
119. PRESENT MAXIMUM EFFICIENT RATE (MER) (Required only for Pacific and Alaska Regions.)							120. REQUESTED MER (Required only for Pacific and Alaska Regions.)								
THIS SPACE FOR MMS USE ONLY REQUESTED MER CACCEPTED REJECTED (Pacific and Alaska OCS Regions)															
MMS AUTHORIZIN	G OFFI	CIAL							E	FFECTIVE	DATE				

## MMS FORM MMS-127 (Oct 2005 - Replaces all previous editions of Form MMS-127 which may not be used.)

116. REMARKS

27. CONTACT TELEPHONE NO.	32. CONTACT E-MAIL ADDRESS
28. AUTHORIZING OFFICIAL (Type or print name)	29. TITLE
30. AUTHORIZING SIGNATURE	31. DATE

PAPERWORK REDUCTION ACTOF 1995 (PRA) STATEMENT: The PRA (44. U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain definite and firsthand knowledge of reservoir characteristics and parameters. We use this information to classify the reservoir as sensitive and to evaluate the lessee's request for approval of a Maximum Efficient Rate of Production. Responses are mandatory (43. U.S.C. 1334). Proprietary data are covered under 30 CFR 250.196. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden of this form is estimated to average 2.2 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of the this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, N W, Washington, DC 20240.