Submit 5 Copies
Appropriate District Office
EISTRIC I.1
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

MGF 0il Corporation  Address  P. O. Box 21540, Tulsa, OK 74121-1540  Reason(s) for Filing (Check proper box)  New Well  Change in Transporter of: Change on gas is effective 11/1/91  Recompletion  Oil Dry Gas Set up of condensate gatherer is effect in the set of previous operator give name and address of previous operator  H. DESCRIPTION OF WELL AND LEASE  Lease Name MGF-Sun Well No. Pool Name, Including Formation House Yates Seven Rivers Gas  Well No. Feet From The South Line and 1980 Feet From The West  Section 32 Township 195 Range 39E NMPM, Lea  Other (Please explain)  Other (Please explain)  Change on gas is effective 11/1/91  Set up of condensate gatherer is effect in the set of condensate gatherer is effect in	91
P. O. Box 21540, Tulsa, OK 74121-1540  Reason(s) for Filing (Check proper box)  New Well Change in Transporter of: Change on gas is effective 11/1/91  Recompletion Oil Dry Gas Set up of condensate gatherer is effect Change in Operator give name and address of previous operator  U. DESCRIPTION OF WELL AND LEASE  Lease Name Well No. Pool Name, Including Formation  MGF-Sun 1 House Yates Seven Rivers Gas  West No. Peet From The South Line and 1980 Feet From The West  Nest Name West No. Peet From The South Line and 1980 Feet From The West	91
Change in Transporter of:   Change on gas is effective 11/1/91	91
Recompletion Oil Dry Gas Set up of condensate gatherer is effect Change in Operator Casinghead Gas Condensate Set up of condensate gatherer is effect 12/1/  I change of operator give name and address of previous operator  II. DESCRIPTION OF WELL AND LEASE  Lease Name Well No. Pool Name, Including Formation House Yates Seven Rivers Gas State, Federal of Feet From The South Line and 1980 Feet From The West	91
Change in Operator Casinghead Gas Condensate E 12/1/  I change of operator give name and address of previous operator  U. DESCRIPTION OF WELL AND LEASE  Lease Name Well No. Pool Name, Including Formation House Yates Seven Rivers Gas State, Federal of Fee Condensate E 12/1/    West Name   West   No. Pool Name, Including Formation   No. Pool Na	91
If change of operator give name and address of previous operator  II. DESCRIPTION OF WELL AND LEASE  Lease Name  Well No. Pool Name, Including Formation  House Yates Seven Rivers Gas  West, Federal of Fee  Lease Name  Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West	
U. DESCRIPTION OF WELL AND LEASE  Lease Name    Well No.   Pool Name, Including Formation   Kind of Lease   State, Federal of Fee   Lease Name   House Yates Seven Rivers Gas   State, Federal of Fee   Lease Name   Location   Unit Letter   N   660   Feet From The   South   Line and   1980   Feet From The   West   Lease Name   Leas	
Lease Name  MGF-Sun  Well No. Pool Name, Including Formation House Yates Seven Rivers Gas  Kind of Lease State, Federal of Fee  Lease N  Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West	
MGF-Sun 1 House Yates Seven Rivers Gas State, Federal of Fee	10
Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West	
20E	
Section 32 Township 19S Range 39E , NMPM, Lea Co	Line
	ounty
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent)	
Enron Oil Trading & Transportation Box 1188, Houston, TX 77251-1188	
Name of Authorized Transporter of Casinghead GaEOII Energy Colpx Address (Give address to which approved copy of this form is to be sent)	
Sid Richardson Carbon & Gasoline Chyp 1-1-93   1st City Bk. Twr., 201 Main St., Ft. Wor If well produces oil or liquids,   Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When ?	76102
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When? give location of tanks. N   32   198   39E   Yes   n/a	70102
If this production is commingled with that from any other lease or pool, give commingling order number:  IV. COMPLETION DATA	
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Designate Type of Completion - (X)	T Res'v
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth	
Perforations Depth Casing Shoe	
TUBING, CASING AND CEMENTING RECORD	
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT	
V. TEST DATA AND REQUEST FOR ALLOWABLE	
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)	
Date First New Oil Run To Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)	
Length of Test Tubing Pressure Casing Pressure Choke Size	
Actual Prod During Test Oil Phile Water - Rhis Gas- MCF	
Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas- MCF	
GAS WELL	
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	
	:
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size	
VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  OIL CONSERVATION DIVISION	
Division have been complied with and that the information given above	
is true and complete to the best of my knowledge and belief.  Date Approved	
(. lan lalkontina	
Signature By	
Charlotte Van Valkenburg, Tech. Coordinator	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.