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LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

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FEB 11 1980

I. Operator
MGF Oil Corporation
Address
P.O. Box 5027, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bikar-Federal
Well No. 1
Pool Name, Including Formation Wildcat
Kind of Lease Federal
State, Federal or Fee Federal
Lease No. NM-10273
Location
Unit Letter G 1980 Feet From The North Line and 1980 Feet From The East
Line of Section 14 Township 10-S Range 29E, NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒
Marlin Petroleum Inc.
Address (Give address to which approved copy of this form is to be sent)
1910 S. Post Oak, Suite 1900, Houston, TX 77056
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
El Paso Natural Gas
Address (Give address to which approved copy of this form is to be sent)
Box 1492, Midland, TX 79701
If well produces oil or liquids, give location of tanks. Unit G Sec. 14 Twp. 10-S Rge. 29E
Is gas actually connected? Yes
When February 7, 1980

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 8-28-79	Date Compl. Ready to Prod. 11-26-79	Total Depth 9800	P.B.T.D. 9790					
Elevations (DF, RKB, RT, GR, etc.) 3975.1 GL	Name of Producing Formation Wildcat	Top Oil/Gas Pay 9382	Tubing Depth 9203					
Perforations 9382-9714	Depth Casing Shoe							

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15 1/2	12 3/4	350	350
12 1/2	8 5/8	2900	1175
7 1/2	4 1/2	9798	500

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1238	Length of Test 24	Bbls. Condensate/MMCF 1	Gravity of Condensate .723
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 2140	Casing Pressure (shut-in)	Choke Size 17/64

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)
Engr. Asst.
(Title)
2-8-80
(Date)

OIL CONSERVATION COMMISSION
SUPERVISOR, DISTRICT II
APPROVED _____, 19____
BY
TITLE FEB 15 1980

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.