	CISTRIBUTION SANTA FE		CONSERVATION COMMIL)N	Form C-104 Supersedes Old C-104 and C-1.				
	U.S.G.S.	AUTHORIZATION TO T	AND RANSPORT OIL AND NAT	URAL GAS	Effective 1-1-65				
	TRANSPORTER OIL GAS								
1.	OPEFATOR PRORATION OFFICE								
	Operator MGF Oil Corporation								
	Address 1126 Vaughn Building, Midland, Texas 79701								
	Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of:								
	Recompletion Change in Ownership	Oil Dry C Casinghead Gas Cond	Gas						
	If change of ownership give name and address of previous owner	Major, Giebel & Forst	er, 1126 Vaughn Bui	lding, Mid	land, Texas 79701				
IJ.	DESCRIPTION OF WELL AN	D LEASE Well No.; Pool Name, Including	Furmation	of Lease					
	Nine Ranch 4	3 Inbe Permo		, Federal or Fee	State K 3983				
	Unit Letter <u>K;1</u>	980Feet From TheSouth_L	ine and <u>1980</u> Fe	et From The <u>W</u>	/est				
	Line of Section 22	Cownship 10-S Range	33-Е , ммрм,	Lea	County				
III.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS						
	Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent) Amoco Pipeline Company 3411 Knoxville Avenue, Lubbock, Texas 79413 Name of Authorized Transporter of Casinghead Gas X or Dry Gas								
	Warren Petroleum C		P. O. Box 1589,						
	If well produces oil or liquida, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected?	When					
IV.	If this production is commingled v COMPLETION DATA	with that from any other lease or pool,	, give commingling order num	per:	1				
	Designate Type of Complet	ion - (X)	New Well Workover De	epen Plug Bo	ack Same Res'v. Diff. Res'v.				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.I	p.				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing	Depth				
	Perforations			Depth C	Casing Shoe				
	HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD	······································	SACKS CEMENT				
		· · · · · · · · · · · · · · · · · · ·							
•									
	FEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)								
Ī	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 S	51 2 •				
-	Actual Prod. During Test	Oil-Bbls.	Water - Bils.	Gas - MC					
-	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 S	ize				
VI. (CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION						
	hereby certify that the rules and Commission have been complied	APPROVED 9, 19, 19							
shove is true and complete to the best of my knowledge and heliof,			BY Joe D. Ramey TITLE Dist. I, Supv.						
	7 6 11		This form is to be fil						
		in recent	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.						
	Engine (T	All sections of this form must be filled out completely for allow- able on new and recompleted wells.							
		<u>r 2, 1971</u>	Fill out only Section	a I. II. III. and	VI for changes of owner, or such change of condition.				

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Fill out	only Sectiona	I, II, III,	and	VI for changes	of
well name or	number, or tran	sporter, or	other	such change of	co
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REFERED

OIL CONSERVICTION COMMIN-NOLE CONSERVICTION COMMIN-NOLES, N. D.