ſ	NO. OF COPIES PECEIVED	1		
	DISTRIBUTION	NEW MEXICO OIL CO	DNSERVATION COMMISS	Form C-104
l	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
	FILE	AND		
	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GA	νS
	LAND OFFICE			
	TRANSPORTER GAS			
	OPERATOR			
T	PRORATION OFFICE	i la		
•.	Operator			
	MGF Oil Corporation			
	Address			
	1126 Vaughn Building, Midland, Texas 79701 Ceason(s) for filing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of:		
	Recompletion		s	
	Change in Ownership	Casinghead Gas Conden	sate	
	If change of ownership give name and address of previous owner	Major, Giebel & Forst	ter, 1126 Vaughn Building	, Midland, Texas 7970
11.	DESCRIPTION OF WELL AND I	LEASE	Kind of Lease	Lease No.
	Lease Name	Well No. Pool Name, Including Fo		
	Nine Ranch.	5 Inbe Permo	Penn	
	Location / T 100	Couth .	e and 2130 Feet From Th	e East
	Unit Letter;98	BO Feet From The South Line	e and <u> </u>	
	Line of Section 22 Tow	nship 10-S Range	33-Е , ммрм, Ц	ea County
				······································
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				denne of this form is as 1
	Name of Authorized Transporter of Oil	S or Condensate	Address (Give address to which approve	1
	Amoco Pipeline C	ompany	3411 Knoxville Ave., Lu Address (Give address to which approve	1DDOCK, Texas 79413
	Name of Authorized Transporter of Cas			
	Warren Petroleum	Corporation Unit Sec. Twp. Rge.	P. O. Box 1589, Tulsa, Is gas actually connected? When	
	If well produces oil or liquids,	t t t t t t	Yes	
	give location of tanks. Yes			
	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give comminging order number.	
14.		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completio	i i	ł i i ł	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Pointation		
	Perforations			Depth Casing Shoe
	TUBING, CASING, AND		D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			for an	nd must be equal to or exceed top allow-
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must able for this depth or be for full 24 hours)				
	OIL WELL Date of Test		Producing Method (Flow, pump, gas lift	;, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			Water - Bbis.	Gas-MCF
	Actual Prod. During Test	Oil-Bbls.	Water - Dins.	
		1	1	<u> </u>
	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
				<u> </u>
V	. CERTIFICATE OF COMPLIAN	CE		
			NOV 9	19/1 19
	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,		APPROVED	
			BYJoe D. Ramey	
			TITLE Dist. I, Supv.	
	(Signature) Engineer (Title)		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 allow- able on new and recompleted wells.	
	•		The second s	
	October 21, 1971 (Date)		well name or number, or transporter, or other additioning	
			Separate Forms C-104 must be filed for each pool in multiply completed wells.	



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