ŀ	NO. OF COPIES RECEIVED			
	DISTRIBUTION	ALEM MENICO OIL	CONSERVATION COMMISSION	Form C-104
-	SANTA FE			Supersedes Old C-104 and C-110
-			FOR ALLOWABLE	Effective 1-1-65
	FILE		AND AND NATURAL O	1
ļ.	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL C	oAS Notifica
	LAND OFFICE			1 1 00
	TRANSPORTER	}		
- }	GAS	İ		
	OPERATOR	•		
1.	PRORATION OFFICE			
1.	Operator			
	Mi duni	st Oil Corporation		
ŀ	Address			
		Wilco Bldg., Midland,	Tavae	
İ	Reason(s) for filing (Check proper box)	itten Brake' Wratema'	Other (Please explain)	
]		Change in Transporter of:	,	
	New Well		S	
Ì	Recompletion	Oil Dry G	—	
	Change in Ownership	Casinghead Gas Conde	ensate	
	If change of ownership give name and address of previous owner			
	and address of previous owner			
**	DESCRIPTION OF WELL AND	FASE	,	
11.	Lease Name	Lease No. Well No. Pool N	Jame, Including Formation	Kind of Lease
	-	1 5 Ch	EVETOO ///	State, Federal or Fee
	Morgan Federal Tract	1	#46100	
	Location		4400	
	Unit Letter ; 198	Feet From TheL	ine and 1980 Feet From	The South
	1			4 -
	Line of Section 27 Tov	vnship 7-8 Range	33-1 , NMPM, RO	Osavelt County
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	iAS	1
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)
	Magnolia Pipeline		P.O. Box 900, Balla	s, Texas
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)
	1			
	None	Unit Sec. Twp. Fge.	Is gas actually connected? Wh	nen
	If well produces oil or liquids,			
	give location of tanks.	0 27 7-8 33-1	No	
	If this production is commingled wi	th that from any other lease or poo	1, give commingling order number:	
IV.	COMPLETION DATA			Plug Back Same Res'v. Diff. Res'v.
		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completic	$\operatorname{cn} = (X)$	X	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	1-26-66	2-12-66	4438	4369
		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	· ·	4218	4075
	4389.3 GL	Sen Andres	4410	Depth Casing Shoe
	Perforations			4435
	4218-4287		NEW DECADE	4433
		TUBING, CASING, A	ND CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
	11"	8 5/8"	3701	300
	7 7/8 ^H	4 1/2**	11461	
		4 1/4	4438'	260
		3 1/4	44.38	260
		3 1/4		260
V.	. TEST DATA AND REQUEST F	OP ALLOWARIE (Test must be	e after recovery of total volume of load of	l and must be equal to or exceed top allow-
V.	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be able for this		l and must be equal to or exceed top allow-
V.	. TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks	OR ALLOWABLE (Test must be able for this	e after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas	l and must be equal to or exceed top allow-
V.	. TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks 1-12-66	OR ALLOWABLE (Test must be able for this Date of Test 1-13-66	e after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas	l and must be equal to or exceed top allow-
V.	TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks 1-12-66 Length of Test	OR ALLOWABLE (Test must be able for this Date of Test 1-13-66 Tubing Pressure	e after recovery of total volume of load of depth or be for full 24 hours) Producing Method (Flow, pump, gas	l and must be equal to or exceed top allow- lift, etc.) Choke Size
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(Date)

Separate Forms C-104 must be filed for each pool in multiply completed wells.