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NO. OF COPIES RECEIVED				
	NEW MEXICO OIL C	NEW MEXICO OIL CONSERVATION COMMISSION		
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65	
U.S.G.S.		AND	14 G.	
LAND OFFICE			. GAS	
TRANSPORTER OIL GAS			66	
OPERATOR				
PRORATION OFFICE				
Operator Midwest Oil Corpora	ition			
Address				
1500 Wilco Building Reason(s) for filing (Check proper bo		and, Texas		
New Well	Change in Transporter of:	Other (Please explain)		
Recompletion	Oil Dry Go			
Change in Ownership	Casinghead Gas 🗌 Conde	nsate		
If change of ownership give name				
and address of previous owner			A . / see	
I. DESCRIPTION OF WELL ANI Lease Name	Well No. Pool Name, Including F	$n n^{\mu} / n$		
Morgan Federal Trac	t 4 5 Chaveroo	San Andres /// State, Fede	eral or Fee Federal	
Unit Letter ;	80 Feet From The S Lir	ne and660Feet From	n The East	
Line of Section 13 T	ownship 7-S Range	33-E , NMPM, Rooser	velt County	
	RTER OF OIL AND NATURAL GA	15		
Name of Authorized Transporter of C Magnolia Pipeline C			roved copy of this form is to be sent)	
Name of Authorized Transporter of C		Address (Give address to which app	Dallas. Texas roved copy of this form is to be sent)	
Capitan Petroleums,	Inc.	P.O. Box 19598	Dallas, Texas	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
give location of tanks.	M 13 7-S 33-E	Yes	6 -25-66	
	with that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Pluz Back Same Res'v. Diff. Res'v.	
Designate Type of Complet		X Seepen		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.ET.D.	
6-4-66	6-15-66	4340		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tuking Depth	
	San Andres	4048	4042	
Perforations			Depth Casing Shoe	
4048-4218		D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-*"	8-5/8"	352	325 Sax	
7-7/8"	4-3"	4340		
V. TEST DATA AND REQUEST		fter recovery of total volume of load of epth or be for full 24 hours)	il and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
7-30-66	7-31-66	Pumping		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
24 Hrs.		Water - Bbls.	Gati - MCF	
Actual Prod. During Test	Oil-Bhis.	water - Bols.		
50	50		55	
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	
I. CERTIFICATE OF COMPLIA			ATION COMMISSION	
I hereby certify that the rules and	regulations of the Oil Conservation		, 19	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY		
-		TITLE		
		This form is to be filed in	n compliance with RULE 1104.	
Herma Ester	\sim	If this is a request for all	owable for a newly drilled or deepened	
(Si	inature)	well, this form must be accomp tests taken on the well in acc	nanied by a tabulation of the deviation	
Production Clerk		All sections of this form p	nust be filled out completely for allow-	
	Title)	able on new and recompleted	wells.	
8-1-66	Data	Fill out only Sections I, well name or number, or transport	II, III, and VI for changes of owner, orter, or other such change of condition.	
()	Date)		ust be filed for each pool in multiply	
		completed wells.		

ONE COPY M 7 BE FI	LED WITH EACH	COMPLETION 3PC	DRT
Field Name	_County	$R\sigma_{1} \sim$	RFC Dist. No.
Operator Midwest Oil Corp.	Address	AUG 3 11	City
Lease Name & No. Morgan Fed. Tr. L	_Well No	- •	to in sol
RECO	RD OF INCLINA	TION	
Angle of Depth (fect) Inclination (degr 354 $1/1$ 805 $11/1$ 1260 $11/2$ 1710 $11/2$ 2935 1 3335 1 3866 $3/1$ 1053 $3/1$ 1340 TD $3/1$	rees) Displa	acement (feet) 1.56 9.83 11.92 11.79 22.57 8.19 7.00 6.96 2.15 3.76	Accumulative <u>Displacement (feet)</u> 1.56 11.39 22.31 35.10 57.67 66.16 73.16 80.12 82.57 86.33
Was survey run in Tubing Distance to nearest lease line Distance to lease lines as prescribed by	feet field rules	Total Displace Open Holefeet	ment86.33
Certification of personal knowledge Incli	nation Data:		

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

Signature

CACTUS DRILLING CORPORATION Company

_ _ Operator Affidavit:

(Note: Party making affidavit must strike out inapplicable phrases, and must file explanatory statement when applicable.)

C Before me, the undersigned authority, on this day, personally appeared ________ tus known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is the operator of the well identified in this instrument (that he is acting at the direction and on behalf of the operator of the well identified in this instrument), and that such well was not intentionally deviated from the vertical whatsoever (and that such well was deviated at random for the reason described in the attached statement).

Signature and Title of Affiant

Sworn and Subscribed to before me, this the day of 14

Notary Public In and for County, Texas.

II. INCLINATION SURVEYS

A. Requirement of

1. An inclination survey made by persons or concerns approved by the Commission shall be filed on a form prescribed by the Commission for each well drilled or deepened with rotary tools or when as a result of any operation the course of the well is changed.

a. The first shot point of such inclination survey shall be made at a depth not greater than 500 feet below the surface of the ground and succeeding shot points shall be made either at 500 foot intervals or at the nearest drill bit change thereto; but not to exceed 1000 feet apart.

2. Inclination surveys conforming to these requirements may be made either during the normal course of drilling or after the well has reached total depth. Acceptable directional surveys may be filed in lieu of inclination surveys.

3. Copies of all directional or inclination surveys, regardless of the reason for which they are run, shall be filed as a part of or in addition to the inclination surveys otherwise required by this rule.

B. Reports

1. The report form prescribed by the Commission shall require that it be signed and certified by a party having personal knowledge of the facts therein contained.

a. The report shall include a tabulation of the maximum drifts which could occur between the surface and the first shot point and each two successive shot points, assuming that all of the unsurveyed hole between any two shot points has the same inclination as that measured at the lowest shot point, and the total possible accumulative drift, assuming that all measured angles of inclination are in the same direction.

2. In addition, the report shall be accompanied by a sworn statement of the operator, or of someone acting at his direction on his behalf either, (1) that the well was not intentionally deviated from vertical whatsoever or, (2) that the well was deviated at random, with an explanation of the circumstances.

3. The report shall be filed in the District Office of the Commission for the district in which the well is drilled, by attaching one copy to each appropriate completion form for the well.

4. The Commission may require the submittal of the original charts, graphs, or discs resulting from the surveys.