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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-110
Effective 1-1-65

I.

Operator Midwest Oil Corporation	
Address 1500 Wilco Building Midland, Texas	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Morgan Federal Tract 4	Well No. 6	Pool Name, including Formation Chaveroo San Andres	Kind of Lease State, Federal or Fee Federal	Lease No.
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 13 Township 7-S Range 33-E , NMPM, Roosevelt County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Magnolia Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Dallas, Texas			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Capitan Petroleums, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 19598, Dallas, Texas			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 13	Twp. 7-S	Rge. 33-E
	Is gas actually connected?		When 8-1-66	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-11-66	Date Compl. Ready to Prod. 6-24-66		Total Depth 4590		P.B.T.D. 4556			
Elevations (DF, RKB, RT, GR, etc.) 4327 CL	Name of Producing Formation San Andres		Top Oil/Gas Pay 4044		Tubing Depth 4015			
Perforations 4044-4164					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-3/4	8-5/8	352	325 Sax
7-7/8	4-3/4	4590	350 Sax

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 8-9-66	Date of Test 8-10-66	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 46	Oil-Bbls. 46	Water-Bbls. 15	Gas-MCF 10

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

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.

Marion Catur
(Signature)
Production Clerk
(Title)
August 11, 1966
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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 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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

Form I-1
11-2-62

1. 6.

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT

Field Name _____ County _____ RRC Dist. No. _____
Operator **Midwest Oil Corporation** Address _____ City _____
Lease Name & No. **Morgan Fed. Tr. 4** Well No. **6** Survey _____

RECORD OF INCLINATION

[illegible]

Total Displacement 75.26

Was survey run in Tubing Drill Pipe X Open Hole _____
Distance to nearest lease line _____ feet
Distance to lease lines as prescribed by field rules _____ feet

Certification of personal knowledge Inclination 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.)

Before me, the undersigned authority, on this day, personally appeared Norma Ester, 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 11th day of August, 1900.

Notary Public in and for Williamson
County, Texas. JONES : 1999. Public Seal

PRC Use Only:

Approved By: _____
Title: _____
Date: _____

INFORMATION AND INSTRUCTIONS AS PER
STATEWIDE RULE 54

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.