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DISTRIBUTION		Form C+104		
ANTA FE	REQUEST	Supersedes Old C-104 and C-1		
FILE		Effective 1-1-65		
U.S.G.S.	_ AUTHORIZATION TO TRA	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE			<u>)</u>	
TRANSPORTER GAS				
OPERATOP	_			
	-			
Operator		· · · · · · · · · · · · · · · · · · ·		
Midwest Oil Corporati	on	·····	,	
1500 Wilbo Building	Midland, Texas	3		
Reason(s) for filing (Check proper bo		Other (Please explain)		
New Well	Change in Transporter of:			
Change in Ownership	Casinghead Gas Conder	nsate		
If change of ownership give name and address of previous owner				
•			. <u></u>	
L. DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	formation Kind of Lease	Lease No.	
Morgan Federal Tract	#4 #7 Chaveroo -San	n Andres State, Federal	cr Fee Federal	
	80 Feet From The South Lin	ne and 1980 Feet From T	he West	
Unit Letter <u>F. ; 19</u>	Feet From The Souch Lin	ne and <u>1980</u> Feet From T	he <u>rest</u>	
Line of Section 13 To	ownship 7-5 Range	33-E , NMPM, Roosev	County	
Name of Authorized Transporter of O	TER OF OIL AND NATURAL GA	Address (Give address to which approv	ed copy of this form is to be sent)	
	teased teased			
Magnolia Pipeline Co Name of Authorized Transporter of C	asinghead Gas 📕 or Dry Gas 🔤	P.O. Box 900 Address (Give address to which approv	Dallas, Texas ed copy of this form is to be sent)	
	_	P.O. Box 19598.	Dallas, Texas	
Capitan Petroleums, If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? Whe		
give location of tanks.	м 13 7-8 33-Е	Yes 8-13-	66	
If this production is commingled w	with that from any other lease or pool,	give commingling order number:		
V. COMPLETION DATA	-			
Designate Type of Complet	ion (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'	
	A	X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.E.T.D.	
<u>6-21-65</u> Elevations (DF, RKB, RT, GR, etc.)	7-1-66	4340	4254	
Elevations (DF, RKB, RT, GR, etc.)		Top Oil/Gas Pay	Tubing Depth	
Perforations	San Andres	4212	4.188 Depth Casing Shoe	
4212-42±8-4240	TUBING CASING AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-1	8-5/8	358	325 Sax	
7-7/8	4-3	4300	260 Sax	
			<u> </u>	
. TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil c epth or be for full 24 hours)	and must be equal to or exceed top allo	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t. etc.)	
			.,,	
8-13-66	8-14-66 Tubing Pressure	Casing Pressure	Choke Size	
_ ·				
24 Hrs. Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gan - MCF	
46	46	Ttace	13	
+0				
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grevity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
L CERTIFICATE OF COMPLIA			TION COMMISSION	
CERTIFICATE OF COMPLIAN				
I bereby certify that the rules and	regulations of the Oil Conservation	APPROVED	, 19	
Commission have been complied	with and that the information given	li l		
above is true and complete to t	he best of my knowledge and belief.			
		TITLE		
Marmal C.L.		This form is to be filed in a	compliance with RULE 1104.	
Marma Citin	inature)	This form is to be filed in o If this is a request for allow	compliance with RULE 1104. able for a newly drilled or deepen yied by a tabulation of the deviati	
Marmal Citan (Sig Production C	nature) lerk	This form is to be filed in c If this is a request for allow well, this form must be accompa- tests taken on the well in accor	compliance with RULE 1104. able for a newly drilled or deepen hied by a tabulation of the deviati dance with RULE 111.	
Production Cl	lerk ^{Fitle}	This form is to be filed in c If this is a request for allow well, this form must be accompa- tests taken on the well in accor All sections of this form mu- able on new and recompleted we	compliance with RULE 1104. able for a newly drilled or deepend hied by a tabulation of the deviation dance with RULE 111. at be filled out completely for allocation lis.	
Production Cl (1 August 15,190	lerk Fitle) 56	This form is to be filed in c If this is a request for allow well, this form must be accompar- tests taken on the well in accor All sections of this form mu- able on new and recompleted we Fill out only Sections I. II	compliance with RULE 1104. able for a newly drilled or deepend hied by a tabulation of the deviation dance with RULE 111. at be filled out completely for allocation lis. III. and VI for changes of owne	
Production Cl (7 August 15,190	lerk ^{Fitle}	This form is to be filed in c If this is a request for allow well, this form must be accompar- tests taken on the well in accor All sections of this form mu- able on new and recompleted we Fill out only Sections I, II well name or number, or transport	compliance with RULE 1104. able for a newly drilled or deepene hied by a tabulation of the deviation dance with RULE 111. at be filled out completely for allow	

THOTHMA	1 IVII	10151	UNI

ONE COPY M BE FILED WITH EACH COMPLETION PORT

Field Name		County		RRC Dist. No
Operator Mid	est Oil Corp.	Address		City
léase Name & N	• Morgan Fed. Tr. 4	Well No		Survey
		RECORD OF INCLI	NATION	
Depth (Angle feet) Inclination	of (degrees) Dis	placement (feet)	Accumulative Displacement (feet)
358		4	<u> </u>	<u> </u>
<u> </u>			9.85	- 14.54
2085		4. ·	-11,79 -25,16	<u></u>
		4. ·	13_39	-64.83
		<u>/2</u>	<u> </u>	
<u>3721</u>		·	1.68	84_06
	<u>1</u>		<u> </u>	<u>8985</u>
				and the state of the
	al an			and for the state of the state
			Total Displac	ement 91,14
Was survey run	in Tucing	rill Pipe	Open Hole	
	arest lease line use lines as prescribed	feet		

Certification of	of personal knowledge [Inclination Data	a:	

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.)

1 Cetu) parma Before me, the undersigned authority, on this day, personally appeared ____ known to me to be the person whose name is subscribed hereto, who, after being duly swom, 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).

	Sworn	and	Subscribed	to	before	me,	this	the	
19_	QG .								1

Signature and Title of Aff 16 th day of <u>laquet</u>

Grod. Clerk

Notary Bublic in and for millan !! County, Texas. Jovor

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.