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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes Old O-104 and C-110
Effective 1-1-66

Operator	
MWJ Producing Company	
Address	
413 First National Bank Bldg., Midland, Texas	
Reason(s) for filing (Check proper box)	
New Well	Change in Transportation
Recompletion	Oil
Change in ownership	Gas
	Changed from The Permian Corporation
	effective August 11, 1967.

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Well Name, Incl. Main Formation	Kind of Lease
Cato State	1	Cato-San Andres	State, Federal or Fee
Location			State
Section	M	660	West
Range	2	8S	30E
Township		Chaves	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	Name of Authorized Transporter of Gas	Address (Give address to which approved copy of this form is to be sent)
Mobil Pipe Line		P.O. Box 900, Dallas, Texas 75221
Name of Authorized Transporter of Gas		
None		
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	K	2
	8S	30E
	No	

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	Gas Well	New Well	Workover	Deepen	Flowback	Same hole, Diff. hole
Date Completed	Date Compl. Ready to Prod.	Total Depth					
Name of Producing Formation	Top of Hole	Bottom Depth					
Perforations		Length of Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				

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	Date of Test	Flowing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
		Gas-MCF

GAS WELL

Actual Prod. Test-MCF	Length of Test	Bbls. Condensate-MCF	Gravity of Condensate
Flowing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

R. Ken Williams
(Signature)

R. Ken Williams President

August 10, 1967

(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 Sections I, II, III, and VI only 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