NO. OF COPIES REC	EIVED					
DISTRIBUTION						
SANTA FE						
FILE						
U.S.G.S.						
LAND OFFICE						
TRANSPORTER	OIL					
TRANSPORTER	GAS					
OPERATOR						
PRORATION OFFICE						
Operator						

NEW MEXICO OIL CONSERVATION COMMIL ON REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-11

	U.S.G.S.		+-+		·		AND				ective 1-1-	65
	LAND OFFICE	_	 	AUT	HORIZAT	ION TO TR	ANSPOR	T OIL AND	NATURAL	GAS		
	TRANSPORTER OIL		\Box									
	GA	\S										
	OPERATOR											
1.	PRORATION OFFICE Operator	PRORATION OFFICE										
	MGF Oil Corpo	ratio	on									
	Address											
	1126 Vaughn B	1126 Vaughn Building, Midland, Texas 79701										
	Reason(s) for filing (Check proper box)						Other (Please explain)					
	New We!l	New Weil Change in Transporter of:										
	Change in Ownership			Oil	head Gas	Dry C	=					
				Custing	nedd Gds [Cond	ensate	<u> </u>				
	If change of ownership g and address of previous		ne									
		-										
11.	DESCRIPTION OF WI	ELL A	ND L			ne, Including						
	Stan			1	1	n Bagley			Kind of Leas State, Federa	50	ate	Lease No.
	Location	-			I NOT 61	1 Dagrey	генн		Sidie, Federa	lor Fee Fe	<u>e</u>	K 6370
	Unit Letter I	;	660	Feet F	rom The Ea	ast ,,	ne and	1980	Feet Fee !	s. So	outh	
									reetriom	ne		
	Line of Section	9	Towns	ship 12-	<u>-S</u>	Range	33 - E	, NMPM,		Lea		County
111	DESIGNATION OF TE	DANCD	OBTE	en on or	T 431D 314							
111.	DESIGNATION OF TE	porter of	OIL	A or	Condensate	TUKAL G		Give address t	which approx	ed copy of the	ie form is e	- ha ar-al
	Miller Oil Pur	chasi	ng C	- Company		_		West Fro				•
	Miller Oil Pur				or Dr	y Gas 🗔	Address (Give address t	which approx	ed copy of the	is form is to	o be sens)
	Warren Petrole	um Co). Box 158		, Oklaho	ma 74]	L00
	If well produces oil or liquique location of tanks.	uids,	1	_ ′	Twp	1		tually connecte	d? Whe	n		
	<u></u>		i	<u> </u>		12S; 33E	Yes		· · · · · · · · · · · · · · · · · · ·			
IV.	If this production is come COMPLETION DATA	mingled	with	that from a	any other le	ease or pool,	give comm	ingling order	number:			·
		C1		(V) !	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res	'v. Diff. Res'v
	Designate Type of	Comple				1	<u>i</u>	_ i	, !	1	1	!
	Date Spudded		٦	ate Compl.	Ready to Pr	rod.	Total Dep	th		P.B.T.D.		
	Elevations (DF, RKB, RT,	CR ata	. N	Igme of Pro	ducing Form	gtion	Top 011/0	Ge Deu		7.1.		
	, , , , , , , , , , , , , , , , , , ,	on, esc	"		accing a orm	4	Top On/o	sus Puy		Tubing Dept		
	Perforations									Depth Casin	g Shoe	
							CEMENT	ING RECORD				
	HOLE SIZE		-	CASIN	G & TUBIN	IG SIZE	ļ. , <u></u>	DEPTH SE	T	SA	CKS CEM	ENT
												
	······································											
V.	TEST DATA AND REC	QUEST	FOR	ALLOWA	ABLE (T	est must be a	fter recovery	of total volum	e of load oil a	nd must be eq	ual to or ex	cceed top allow
j	OIL WELL Date First New Oil Run To	Tanks	D	ate of Test		ole for this de		full 24 hours) Method (Flow,		etc.)		
	Date of 1881						The state of the s					
ŀ	Length of Test		T	Tubing Pressure			Casing Pressure			Choke Size		
Ĺ					_							
	Actual Prod. During Test		0	il-Bbls.			Water - Bbl	6.		Gas-MCF		
Į							L		· · · · · · · · · · · · · · · · · · ·			
	GAS WELL											
ſ	Actual Prod. Test-MCF/D		L	ength of Ter	et		Bbls. Cond	iensate/MMCF		Gravity of Co	ondensate	
								•		•		
Γ	Testing Method (pitot, back	k pr.)	Tu	bing Press	we (Shut-1	la)	Casing Pre	sewe (Shut-	.m.)	Choke Size		
Ł	· · · · · · · · · · · · · · · · · · ·		L_									
VI. (CERTIFICATE OF CO	MPLIA	NCE					OIL C	ONSERVA	LION COM	MISSION	
		•	•	•			APPRO	VED		•		
	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 helicif.				APPROVED			January Contract				
•												
		_					TITLE Conlegist					
	(Signature)					ľ						
	Ki /ki	no har larg					This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened					
-	(Signature)					well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
_	ingineer					All sections of this form must be filled out completely for allow-						
	May 13, 1975	C	Title)				able on	new and reco	mpleted well			
(Date)						Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of c						of condition.