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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator MGF Oil Corporation Address 1126 Vaughn Building, Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Change of name of lease Recompletion Dry Gas Oil Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Lease No. K6270 Kind of Lease State Lease Name State, Federal or Fee Stan "A" Com North Bagley Penn Fee Location 1980 1980 East South Line and_ eet From The Feet From The Unit Letter 12-S 33-E Lea NMPM Line of Section County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil 💢 Address (Give address to which approved copy of this form is to be sent) The Permian Corporation P. O. Box 3119, Midland, Texas 79701 Name of Authorized Transporter of Casinghead Gas 🔀 Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, Oklahoma 74100 Is gas actually connected? When Warren Petroleum Corporation Rge. If well produces oil or liquids, give location of tanks. Unit 9 12-S 33-E If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Compl. Ready to Prod. P.B.T.D. Total Depth Date Spudded Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE SACKS CEMENT HOLE SIZE **DEPTH SET** (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Water - Bbls. Gas - MCF Oil-Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION APPROVED. 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. Orig. Signed by Joe D. Ramey Dist. I, Supv. TITLE . This form is to be filed in compliance with RULE 1104. well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

VI. CERTIFICATE OF COMPLIANCE

Engineer (Title) January 24, 1972

(Date)

If this is a request for allowable for a newly drilled or despened

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