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| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

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

| | | |
|--|---|--|
| Operator MWJ Producing Company | | |
| Address 1804 First National Bank Building, Midland, Texas 79701 | | |
| Reason(s) for filing (Check proper box) | | Other (Please explain) |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: | CASHHEAD GAS MUST NOT BE PLACED ON UNLESS AN EXCEPTION TO R-4070 IS OBTAINED. |
| 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"/> | |

If change of ownership give name and address of previous owner _____
THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTE THE ORDER NUMBER R-6536

| | | | | | |
|---|--|---------------|--|--|---------------------|
| Lease Name Saunders 28 State | | Well No. 1 | Pool Name, Including Formation Saunders Permian Penn. | Kind of Lease State, Federal or Fee | Lease No. L-5087 |
| Location Unit Letter F ; 1980 Feet From The North Line and 1980 Feet From The West Line of Section 28 Township 14S Range 33E , NMPM, Lea County | | | | | |

| | | | | | |
|--|-----------|--|-------------|-------------|---------------------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation | | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001 | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation | | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589 Tulsa, Oklahoma 74102 | | | |
| If well produces oil or liquids, give location of tanks. | Unit F | Sec. 28 | Twp. 14S | Rge. 33E | Is gas actually connected? When No |

If this production is commingled with that from any other lease or pool, give commingling order number: _____

| | | | | | | | | | |
|---|--|--------------------------|-----------|-----------------------|--------------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | | X | | X | | | | | |
| Date Spudded 8/2/80 | Date Compl. Ready to Prod. 10/17/80 | Total Depth 10,100' | | P.B.T.D. 10,035' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4216.6' Gr. | Name of Producing Formation Penn. | Top Oil/Gas Pay 9948' | | Tubing Depth 9906' | | | | | |
| Perforations 9948'-9954' | | | | Depth Casing Shoe | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 17 1/2" | 13 3/8" | | 420' | | 400 Sx. | | | | |
| 11" | 8 5/8" | | 4126' | | 1500 Sx. | | | | |
| 7 7/8" | 5 1/2" | | 10,100 | | 300 Sx. | | | | |

| | | | | |
|---|--------------------|--------------------------|--|--|
| Date First New Oil Run To Tanks 10/17/80 | | Date of Test 10/17/80 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hrs. | Tubing Pressure | Casing Pressure | Choke Size | |
| Actual Prod. During Test 195 | Oil - Bbls. 140 | Water - Bbls. 55 | Gas - MCF 180 | |

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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.

R. R. Toole
(Signature)
Agent
10/20/80
(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.