

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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| SANTA FE | | |
| FILE | | |
| U.S.O.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRODUCTION OFFICE | | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
MGF Oil Corporation

Address
Box 360, Midland, Texas 79702

Reason(s) for filing (Check proper box)

| | | |
|--|---|-------------------------------------|
| <input checked="" type="checkbox"/> New Well | Change in Transporter of: | <input type="checkbox"/> Dry Gas |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil | <input type="checkbox"/> Condensate |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas | |

Other (Please explain)
**CASINGHEAD GAS MUST NOT BE
STARTED AFTER 4-6-87
UNLESS AN EXCEPTION TO R-4020
IS OBTAINED.**

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
COPY THIS OFFICE

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|------------|---|--|-----------|
| Lease Name E. B. Anderson | Well No. 3 | Pool Name, including Formation Stallion (Devonian) | Kind of Lease State, Federal or Fee Fee | Lease No. |
| Location Unit Letter M : 330 Feet From The South Line and 330 Feet From The West Line of Section 6 Township 13-S Range 38-E, NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

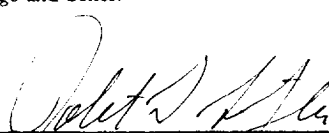
| | |
|--|---|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Tesoro Crude Oil Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 17536, San Antonio, Texas 78286 |
| Name of Authorized Transporter 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) Box 1589, Tulsa, Oklahoma 74100 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When M 6 13-S 38-E No Est. 3-1-87 |

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
Production Manager
(Title)
2-11-87
(Date)

OIL CONSERVATION DIVISION

APPROVED **FEB 16 1987**, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT SUPERVISOR

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.

IV. COMPLETION DATA

| | | | | | | | | | |
|---|-----------------------------|-----------------|-----------|--------------|---------------------|--------|-------------------|-------------|--------------|
| 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 | Date Compl. Ready to Prod. | Total Depth | | P.B.T.D. | | | | | |
| 12-20-86 | 1-29-87 | 12,210' | | 12,210' | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | | Tubing Depth | | | | | |
| 3862' GL, 3877' KB | Devonian | 12,170' | | 12,177' | | | | | |
| Perforations | | | | | | | Depth Casing Shoe | | |
| None Open hole 12170-12210' | | | | | | | 12,170' | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 17 1/2" | 13 3/8" | | 414' | | 420 "C", 2% CaCl | | | | |
| 12 1/4" | 9 5/8" | | 4550' | | 1400 Lite, 6% D-20 | | | | |
| 7 7/8" | 5 1/2" | | 12170' | | 1900 "H", 50-50 poz | | | | |
| 7 7/8" | 2 7/8" | | 12,177' | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 | Producing Method (Flow, pump, gas lift, etc.) | |
| 2-6-87 | 2-10-87 | Flow | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 hrs. | 565# | 0# | 13/64" |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |
| | 442 | 0 | 160 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |