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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Enc _, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		T	O TRA	NSP	ORT OIL	AND NAT	URAL GA	S	N/ N/a			
Operator								Well A	Weil API No. 30-025-28987			
MGM Oil and Gas	Company							1 30-0	25-2898	1		
P.O. Box 891, M	idland,	Texas 7	79702				(D)	·				
Reason(s) for Filing (Check p	roper bax)			T		U Othe	s (Please expla	ur)				
New Well		Oil	hange in	Dry C								
Recompletion U Change in Operator		Ou Casinghead		•	enmte [
				<u> </u>	D	O Pov 1	610. Mid	land. Te	exas 797	702		
change of operator give named address of previous operations	tor ARCO	Dil and	Gas	Com	oany. P.	U. BUX I	OLV, MLC					
L DESCRIPTION O	F WELL A	ND LEA	SE		N I aludio	- E		Kind o	(Lease	Le	ase No.	
Lease Name	Well No. Pool Name, Including 1 Knowles Wo					e, Federal or Fee						
R.F. Fort				Kil	OWIES NO	11000.57	~ =					
Location Unit Letter	<u>L</u>	:23	310	. Feet	From The _S	outh_Line	and330_	Foo	et From The .	West	Line	
Section 24	Township	17S		Rang	• 38E	, 70	ирм,		Lea		County	
III. DESIGNATION	OF TRANS	PORTE	OF O	IL A	ND NATU	Address (Give	e address to wh	ich approved	copy of this f	orm is to be se	nt)	
Name of Authorized Transpo		\square	or Condex	, self		l .	Box 118					
Permian Corp Name of Authorized Transp		ead Gas	(X)	or D	ry Gas 🔲	Address (Giv	e address to wh	ich approved	copy of this f	orm is to be se	ni)	
Phillips 66 Nat				4001 Penbrook, Odessa,								
If well produces oil or liquid		Sec.	Twp. Rge.		is gas actually	y connected?		Whea?				
give location of tanks.		L L	24	17		yes		lunk	nown			
If this production is comming	pled with that fr	om any othe	er lease or	pool,	give comming	TUB OLDER BITTER		 				
IV. COMPLETION	DATA		Oil Wel		Gas Weil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of (Completion -	(X)	101 46	'	025011	1	i			1		
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.				
					To-OliCan Park			Tubing Depth				
Elevations (DF, RKB, RT, C	Name of Pr	ame of Producing Formation				Top Oil/Gas Pay			1 norus rebu			
						L			Depth Casi	ng Shoe	·	
Perforations												
TUBING, CASING AND						CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
									 	·		
									 			
						 						
V. TEST DATA AN	DEOUES	T FOR A	LLOW	ABL	Æ	<u> </u>						
OIL WELL (Test	must be after re	covery of 10	ial volum	e of lo	ad oil and mus	t be equal to or	exceed top all	owable for thi	s depth or be	for full 24 hos	<i>8</i> 3.)	
Date First New Oil Run To		Date of Te				Producing M	iethod (Flow, p	ump, gas lift, i	elc.)			
						C			Choke Size	Choke Size		
Length of Test		Tubing Pressure				Casing Pressure						
		Oil - Bbls.				Water - Bbls.			Gas- MCF			
Actual Prod. During Test												
		<u> </u>				.1						
GAS WELL		ll enoth of	Test			Bbis. Conde	ame/MMCF		Gravity of	Condensate		
ACTUAL PROG. Test - MCF/L	tual Prod. Test - MCF/D Length of Test											
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size					
						٠						
VI. OPERATOR	CERTIFIC	ATE OF	COM	PLI	ANCE		OIL CO	NSERV	ATION	DIVISIO	NC	
I hereby certify that the	rules and regul	ations of the	: Oil Cons	ervalik	00		OIL OO.	· · · · ·		100	n n	
Division have been con is true and complete to	iplied with and the best of my	max me imo knowledge a	rmauos g and belief.	iven a	W16	Dot	e Approve	ad		الله الله	州	
The same of the same same						Dat	a whhinai					
Also, Marie						D.,	() () () ()	BAAN TOTAL	18 07 35 9	'SY SEXTO	N	
Signature	1 n	10			1. 1.	_∥ By_				SOU SEXTO		
mon Ou	V CIAB	Cony	nary	Ti	Invesidea No	Title						
Printed Name	•	9)	5-68			1 1111	5					
Duta			ī	elepho	ne No.							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

SCT 0 5 199C

OCD HOBBS OFFICE