

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED BY  
SEP 29 1983  
O. C. D.  
ARTESIA, OFFICE

Form C-104  
Revised 10-1-78

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

I. Operator  
Mesa Petroleum Co. ✓

Address  
P. O. Box 2009 / Amarillo, Texas 79189

Reason(s) for filing (Check proper box) Other (Please explain)

New Well  Change in Transporter of:  
 Oil  Dry Gas   
 Recompletion  Oil  Condensate   
 Change in Ownership  Casinghead Gas

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Carol Fed Com	Well No. 7	Pool Name, including Formation West Pecos Slope Abo	Kind of Lease <del>NM</del> Federal <del>NM</del> NM	Lease No. 36653
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Location  
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West  
Line of Section 1 Township 7 South Range 22 East , NMPM, Chaves Count.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" 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 type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline (Attn: Andy Berdy)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2521 / Houston, Texas 77001

If well produces oil or liquids, give location of tanks. Unit K Sec. 1 Twp. 7 Rge. 22 Is gas actually connected? No When 11-2-88

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
		X	X					

Date Spudded 9-2-83	Date Compl. Ready to Prod. 9-17-83	Total Depth 3200'	P.B.T.D. 3151'
Elevations (DF, RKB, RT, GR, etc.) 4182' GR 4195' RKB	Name of Producing Formation Abo	Top Oil/Gas Pay 2857'	Tubing Depth 3008'
Perforations 2857' -- 3005'			Depth Casing Shoe 3200'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12"	8 5/8"	1205'	450/200/375
7 7/8"	4 1/2"	3200'	400
	2 3/8"	3008'	-

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top all able 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.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
		Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1523	Length of Test 4 hours	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pistol, back pr.) Back Pressure	Tubing Pressure (Shut-in) 865	Casing Pressure (Shut-in) 890	Choke Size -

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 above is true and complete to the best of my knowledge and belief.

XC: NMOCD-A(O+5), CEN RCDS, ACCTG, MAT CONT, GAS CONT, OPS(FILE), MIDLAND, ROSWELL, D&M, TW, P, PARTNERS

R. E. Mathis  
(Signature)  
REGULATORY COORDINATOR  
(Title)  
9-28-83  
(Date)

OIL CONSERVATION DIVISION  
NOV 08 1983

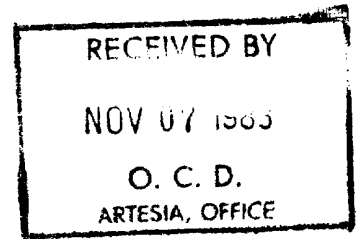
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Mike Walker  
TITLE OIL AND GAS INSPECTOR

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviat. tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all able on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filled for each pool in multi-completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210



NOTICE OF GAS CONNECTION

DATE November 4, 1983

This is to notify the Oil Conservation Division that connection for the purchase of gas from the Mesa Petroleum Co. ✓ Operator

Carol Fed.  
Lease

<sup>R</sup>  
#7 - Unit Letter ~~Unknown~~  
Well Unit

1-7S-22E, Chaves County  
S.T.R.

West Pecos Slope (Abo)  
Pool

Transwestern was made on November 2, 1983  
Name of Purchaser

Transwestern Pipeline Company  
Company

Rodney C. Burke Rodney C. Burke  
Representative

Jr. Analyst, Contract Administration  
Title

cc: Operator  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501