

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

NO. OF COPIES REQUIRED	
DISTRIBUTION	
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

Operator	Mesa Petroleum Co.		
Address	1660 Lincoln Street, Suite 2800, Denver, CO 80264		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input checked="" 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 _____

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
South Blanco 31	#1	Lybrook Gallup Ext.	State, Federal or Fee Federal	NM 33005
Location				
Unit Letter	G	: 2290' Feet From The North Line and 2290' Feet From The East		
Line of Section	31	Township 24N	Range 7W	NMPM, Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Permian Corporation	P. O. Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Mesa Petroleum Co.	1660 Lincoln Street, #2800, Denver CO 80264					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	31	24N	7W	No	ASAP

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Res'v.	Diff. Res'v.
	X							
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
12/15/80	1/31/81		5750'		5695'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6980' GL Ungraded	Gallup		5440'		5669'			
Perforations					Depth Casing Shoe			
5440-45', 5461-65', 5557-68', 5608-16', 5630-40'					5743'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" csg		244'		200 sxs Class "B"			
7 7/8"	4 1/2" csg		5743'		400 sxs 65/35 poz,			
	2 3/8" tbg		5669'		435 sxs 50/50 poz			

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 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.)	
2/11/81	2/11/81	pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	25 psi	25 psi	N/A
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
60 bbls	60 bbls	-0-	60 MCF

GAS WELL

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

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.

16-01 16-01
(Signature)
Division Production Supervisor
(Title)
April 15, 1981
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 15 1981, 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.