Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
REQUE

REQUEST FOR ALLOWABLE AND AUTHORIZATION

<u>.                                    </u>		OTRA	NSPC	ORT OIL	AND NA	TURALGA	AS					
Operator MESA OPERATING LIMITED PARTNERSHIP							Well API No. 30-039-08066					
Address P.O. BOX 2009, AMAR	ILLO. TF	EXAS 7	9189							<del></del>		
Reason(s) for Filing (Check proper box)  New Well  Recompletion		Change in				ner (Please expla	·					
Change in Operator	Casinghead	i Gas 🗌	Conden		Effe	ctive Dat	e: 7/01	L/90 				
f change of operator give name and address of previous operator								<u> </u>				
II. DESCRIPTION OF WELL	AND LEA	SE										
Lease Name FEDERAL	Well No. Pool Name, Includir 11 Basir				ng Formation n Dakota			nd of Lease Lease No. 179295				
Location Unit Letter B	. 10	070	Feet Fr	on The	North	ne and 175	0 5	et From The	East	Line		
Section 23 Townshi	26	5N	Range	6W		impm,	Rio Arr			County		
										Codiny		
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE						Lish a			4)		
Name of Authorized Transporter of Oil or Condensate						Address (Give address to which approved copy of this form is to be sent)  P.O. BOX 12999, SCOTTSDALE, AZ 85267						
Name of Authorized Transporter of Casinghead Gas or Dry Gas X EL PASO NATURAL GAS CO.					P.O. BOX 12999, SCOTTSDALE, AZ 85267  Address (Give address to which approved copy of this form is to be sent)  P.O. BOX 1492, EL PASO, TX 79998							
If well produces oil or liquids,	Unit Sec. Twp. Rge.				Is gas actually connected? When			?				
give location of tanks.  If this production is commingled with that	from any oth	23 er lease or			1	es	1	<u>T</u>	/6/66			
IV. COMPLETION DATA			<u> </u>	- Consisting								
Designate Type of Completion	- (X)	Oil Well	1   C	las Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded Date Compl. Ready to Prod.					Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth				
Perforations	<u> </u>				<u> </u>			Depth Casin	g Shoe	<del>.</del>		
TUBING, CASING AND						CEMENTING RECORD						
HOLE SIZE	CAS	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUE	ST FOD A	HOW	ADIE						~~			
OIL WELL (Test must be after				oil and must	be equal to o	or exceed top all	owable for this	depth or be j	for full 24 hou	ors.)		
Date First New Oil Run To Tank Date of Test					Producing N	Method (Flow, pr	ump, gas lift, e	tc.)				
Length of Test	Tubing Pre	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.				DET	FIA	GARGE	<u>.</u> .			
GAS WELL		**********			1	JUL 1	6 1990	שי				
Actual Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate/MMCF			ondensate	<u> </u>		
Testing Method (pitot, back pr.)	Tubing Pre	Tubing Pressure (Shut-in)				sure (Shut-DIS	77. 3	Choke Size				
VI. OPERATOR CERTIFIC	LATE OF	СОМ	PLIAN	ICE	<del> </del>							
I hereby certify that the rules and regu Division have been complied with and	lations of the	Oil Conse	rvation			OIL COI	NSERV.	ATION	DIVISIO	NC		
is true and complete to the best of my				•	Dat	e Approve	ed	JUL	1 6 199	0		
alskyn J.	MG	le			By_	· ·	7	دبن	$\mathcal{A}$			
Signature Carolyn L. McKee, Regulatory Analyst Printed Name Title					SUPERVISOR DIS: T 43							
7/1/90 Date	(806)	378-1	000	<u></u>	Title	9			<del></del>			
		16	lephone N	W.	11							

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.