

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

II. DESCRIPTION OF WELL AND LEASE State Lease #'s: E-6348, B11017, E-1034, E8984, E3149				
Lease Name St. Com AF	Well No. 28E	Pool Name, Including Formation Basin - Dakota	Kind of Lease State, Federal or Fee State	Lease No. See Above
Location				
Unit Letter <u>I</u> : <u>1460</u> Feet From The <u>south</u> Line and <u>1100</u> Feet From The <u>east</u>				
Line of Section <u>36</u> Township <u>29N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

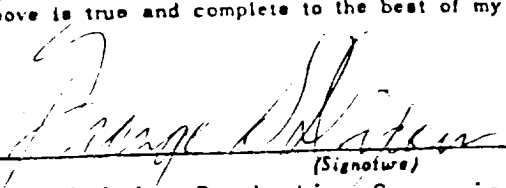
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Inland Corporation		Address (Give address to which approved copy of this form is to be sent) Box 1528, 5800 E. Main, Farmington, NM 87401		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company		Address (Give address to which approved copy of this form is to be sent) P.O. Box 990, Farmington, NM 87401		
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 36	Twp. 29N	Rge. 10W
Is gas actually connected?		When		
No		ASAP		

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

V. 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 6/13/80	Date Compl. Ready to Prod. 3/17/81	Total Depth 6640'		P.B.T.D. 6607'					
Elevations (DF, RKB, RT, GR, etc.) 5744' GR	Name of Producing Formation Dakota-Graneros	Top Oil/Gas Pay 6431'		Tubing Depth 3958'					
Perforations 6431', 33,35,90,92,94,96,97,6505,07',09', Reperf: 6504'-10, 6490-98, 6430-35, (2 JS/ft)				Depth Casing Shoe 6638'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"		8 5/8" csg 24#		278'		180 sxs Class "B"			
7 7/8"		5 1/2" csg 15.5#		6638'		1350 sxs 60/50 poz& 400 sxs 65/35 poz			
		2 1/16" tbg		6403'					

VI. 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D 248	Length of Test 3	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) BP	Tubing Pressure (Shut-in) 1130 psi	Casing Pressure (Shut-in) 1130 psi	Choke Size .750

I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
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.		APPROVED <u>APR 1 1981</u>	
 Division Production Supervisor (Title)		BY <u>Original Signed by FRANK E. CHAVEZ</u> SUPERVISOR	
4-8-81 (Date)		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.	