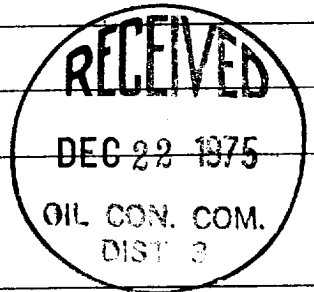


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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Mesa Petroleum Co.	
Address P. O. Box 2009 Amarillo, Texas 79105	
Reason(s) for filing (Check proper box)	Other (Please explain)
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 \_\_\_\_\_

Lease Name Primo		Well No. 1A	Pool Name, Including Formation <sup>247</sup> Blanco {Pictured Cliffs}	Kind of Lease State, Federal or Fee Federal
Location Unit Letter <u>D</u> ; <u>1190</u> Feet From The <u>North</u> Line and <u>1190</u> Feet From The <u>West</u>				
Line of Section <u>6</u> , Township <u>31N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Inland Corp.		Address (Give address to which approved copy of this form is to be sent) Box 1528 Farmington, New Mexico				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering		Address (Give address to which approved copy of this form is to be sent) Box 398 Bloomfield, New Mexico				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	1/2/76

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res <sup>ty</sup> .	Diff. Res <sup>ty</sup> .
			X	X					
Date Spud led 9/3/75	Date Compl. Ready to Prod. 12/7/75	Total Depth 5114'		P.B.T.D. 5082'					
Pool Blanco	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2711'		Tubing Depth					
Perforations 2711' - 2723'				Depth Casing Shoe 5109'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET				SACKS CEMENT			
13-3/4"	10-3/4"	165' KB				125			
8-3/4"	7"	3016' KB				300			
6"	4-1/2"	2801'-4631' KB				300			
3-7/8"	2-7/8"	4560'-5109' KB				50			
	2-1/16"	4548' KB 2-1/16" set @ 2769' KB							

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		Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D 2227		3 Hrs.		-----		-----	
Testing Method (pitot, back pr.) Back Pressure		Tubing Pressure no tbq.		Casing Pressure 156 psig		Choke Size 3/4"	

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED <u>DEC 22 1975</u> , 19 _____	
BY <u>ORIGINAL SIGNATURE</u>		BY _____	
TITLE <u>PETROLEUM ENGINEER DIST. NO. 3</u>		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 Sections I, II, III, and VI only 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.			
(Signature) <u>[Signature]</u> Operations Manager (Title)			
12/19/75 (Date)			
XC: 5 State, 1 Archer			