_							•					
	NO. OF COPIES RECEIVED	5										1
	DISTRIBUTION	<u> </u>	NEV	MEXIC	011 00	ONSERVATION COMMISSION FOR ALLOWABLE			Form C-104 .			
ſ	SANTA FE			REC	QUEST F				Supersedes Old C-104 and C-116 Effective 1-1-65			
	FILE					AND ANSPORT OIL AND NATURAL O				THECHIVE	1-1-03	
	U.S.G.S.		AUTHORIZA	ATION 7	O TRAN				RAL GA	۸S		
	LAND OFFICE											
	TRANSPORTER GAS											
	OPERATOR											
	PRORATION OFFICE	17-1										
	Mesa Petroleum Co. Address P.O. Box 2009, Amarillo, TX 79189 Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership Casinghead Gas Condensate If change of ownership give name											
II.	and address of previous of DESCRIPTION OF WE		LEASE							Kind of Lago		
	Lease Name			Well No.	Pool Nan	ne, Including	Formatio	on		Kind of Lease State, Federal o	• 500	_
	State Com S			15A	Undes	s - Fru	uitla	nd		State, rederal o		State
	Unit Letter D; 790' Feet From The North Line and 1190' Feet From The West											
	Line of Section 36	, То	wnship 32N	R	ange	L2W	, NN	APM,	Sar	ı Juan		County
Ш.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
	Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this joint is to be sent)											
	Inland Corpora	ation corter of Co	singhead Gas	or Dry Go	s 🗍	P.O. Address (G	Box ive addre	1528 ess to whic	Farr h approv	nington ed copy of this fo	NM orm is to	be sent)
	El Paso Natu					P.O.	Box	1492,	El I	Paso, TX	799	78

If well produces oil or liquids, give location of tanks. As soon as possible no If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Res'v. Diff. Res'v. Gas Well Workove Deepen Designate Type of Completion -(X)P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded 5525' 5591' <u>5/9/78</u> 3/18/78 Tubing Depth 2 1/16 @2834 Top Oil/Gas Pay Name of Producing Formation Pool 3/8 @ 5406' 2806' Fruitland Undes Depth Casing Shoe Perforations 2806' - 2820' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 200 sxs 204' 13 3/4" 10 3/4" 3227**'** 335 sxs 8 3/4" 5586 5406 4 1/2" 3/8" 1/8" 430 sxs

Is gas actually connected?

(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) V. TEST DATA AND REQUEST FOR ALLOWABLE 6 OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bbls. Cil-Bbls. Actual Prod. During Test

GAS WELL Gravity of Condensate Bbls, Condensate/MMCF Length of Test Actual Prod. Test-MCF/D

ROVED.

1002 4 hours Choke Size Casing Pressure Testing Method (pitot, back pr.) Tubing Pressure 73 Pitot OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE AUR 70 107

 \sqrt{NMOCC} (5)

Unit

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the Mormachen gives above is true and complete to the best of my knowledge and batter ON'

.T. Archer (1)

Prod Supervisor, (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.

Original Signed by A. R. Kendrick

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.

Carrette Forms CatOd must be filed for each pool in multiply