

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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MAY 21 1987  
OIL CON. DIV.  
DIST. 3

I. Operator  
Mesa Grande Resources, Inc.  
Address  
P. O. Box 274, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal Invader	Well No. 1	Pool Name, including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee Federal	Lease No. NM-43746
Location Unit Letter <u>D</u> ; <u>850</u> Feet From The <u>West</u> Line and <u>1040</u> Feet From The <u>North</u> Line of Section <u>1</u> Township <u>24N</u> Range <u>2W</u> , NMPM, <u>Rio Arriba</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"/> Ciniza Pipeline, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 8900, Salt Lake City, UT 84108					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 1	Twp. 25N	Rge. 2W	Is gas actually connected? No	When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Esther J. Greys*  
(Signature)

Secretary

(Title)

5/21/87

(Date)

10-19-87  
OIL CONSERVATION DIVISION  
APPROVED OCT 19 1987, 19  
BY Original Signed by FRANK J. CHAVEZ  
SUPERVISOR DISTRICT 8  
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.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-20-86	Date Compl. Ready to Prod. 5-23-86	Total Depth 8104'			P.B.T.D. 8057'				
Elevations (DF, RKB, RT, GR, etc.) 7347' KB/7335' GR	Name of Producing Formation Mancos	Top Oil/Gas Pay 6724'			Tubing Depth 7508'				
Perforations 6724-7494						Depth Casing Shoe			

#### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8", 36#, K-55	508'	265 sxs
8-5/8"	5-1/2", 17#, K-55	8095'	1600 sxs
	2-7/8" 6.4#	7508'	

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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 3-22-86	Date of Test 5-24-86	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 6 Hrs	Tubing Pressure --	Casing Pressure 840 psig	Choke Size ---
Actual Prod. During Test --	Oil-Bbls. 55	Water-Bbls. 4	Gas-MCF 164

#### GAS WELL

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