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DISTRIBUTION				
SANTA FE		1		
FILE		$\Box I$		
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	/		
	GAS	1		
OPERATOR		1		
PRORATION OFFICE		1	1	

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	DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104			
	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
	FILE		AND				
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (GAS			
	LAND OFFICE	_					
	TRANSPORTER OIL /	_	,				
	GAS /	-					
	OPERATOR /						
I.	PRORATION OFFICE Cperator						
	Mesa Petroleum Company						
	ddress						
	P. O. Box 2009.	P. O. Box 2009, Amarillo, Texas 79105					
	Reason(s) for filing (Check proper box						
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Go	as 🔲				
	Change in Ownership	Casinghead Gas Conde	nsate				
	If change of ownership give name and address of previous owner						
11.		SCRIPTION OF WELL AND LEASE					
	Lease Name		ame, Including Formation	Kind of Lease State, Federal or Fee State			
	State Com O	llA B	Slanco Meseverde	State, rederal or Fee			
	Location						
	Unit Letter 0 ; 990	Feet From The South Lin	ne and 1850 Feet From	The East			
	1/	2014	0.317	_			
	Line of Section 16 To	wnship 29N Range	8 W , NMPM, San	Juan County			
			• •				
III.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Ot	TER OF OIL AND NATURAL GA	Address (Give address to which appro	ved copy of this form is to be sent)			
	Inland Corporation		Box 1528, Farmington				
	, -		Address (Give address to which appro				
	El Paso Natural G	Name of Authorized Transporter of Casinghead Gas or Dry Gas x		Box 990, Farmington, New Mexico			
		Unit Sec. Twp. Rge. Is gas actually connected? When					
	If well produces oil or liquids, give location of tanks.	0 16 29N 8 V		5/1/75			
	If this production is commingled with COMPLETION DATA	ith that from any other lease or pool,	give comminging order number:				
1 .		Oil Well Gas Well	New We'l Workover Deepen	Flug Back Same Resty, Diff. Resty.			
	Designate Type of Completi	on – (X)	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	2/19/75	5/8/75	5765'K.B.	5750'K.B.			
	Elevations (DF, RKB, RT, GR, etc.)		Top Gil/Gus Pay	Tubing Depth			
	6638'GL	Mesaverde	4906'	5719'K.B.			
	Perforations			Depth Casing Shoe			
	4906'-5723'			5760'K.B.			
		TUBING, CASING, AN	D CEMENTING RECORD	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	13 3/4"	10 3/4!!	150' K. B.	125 sx			
	8 3/411	7	3578'K.B.	250 sx			
	6"	4 1/2"	5760'K.B.	245 sx			
		2 3/8"	5719'K.B.	<u> </u>			
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allow-			
	OII. WELL able for this depth or be for full 24 hours).						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (P. tow, pamp, gas to	,,,, e.c.,)			
		Tubing Pressure	Casing Pressure	Choke Size			
	Length of Test	I noted bleasane	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MC			
	Actual Prod. During lest	OII-BBIB.	Water 2 20101	MAY 19 1975			
	l			Inal 10 let 0			
	CAS WELL			OIL CON. COM. /			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of CondensateS 1. 3			
	·			G.d.iii, o. socialistic (
	3310 MCF/D Testing Method (pitot, back pr.)	4hr	Casing Pressure	Choke Size			
	Pitot Tube	85psig	560 psig	2" flow line			
.	L			ATION COMMISSION			
VI.	CERTIFICATE OF COMPLIAN	CE		A O 40##			
	hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given		APPROVED MAY 2 3 1975				
above is true and complete to the best of my knowledge and belief.		By Original Signed by Emery C. Arnold					
		TITLESUPERVISOR DIST. #3					
			11				
	15 001.1.	R. J. Flaker	This form is to be filed in compliance with RULE 1104.				
	To xulles	R. J. Flaker	If this is a request for allow	wable for a newly drilled or deepened anied by a tabulation of the deviation			
	(Sign	Prod. Engr.	tests taken on the well in acco	rdance with RULE 111.			
	-		11				

(Title) 5/15/75 (Date)

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.