

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	2
PRORATION OFFICE	

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, Texas 79105	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Install Compressor 6-1-77
Recompletion <input type="checkbox"/>	
Change In Ownership <input type="checkbox"/>	
Change In Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <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

Lease Name State Com H	Well No. 4	Pool Name, including Formation Blanco Mesa verde	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter G ; Feet From The Line and Feet From The				
Line of Section 32 Township 31 N Range 9 W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Inland Corporation	Box 1528, Farmington, N.M.
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	Box 990, Farmington, N.M.
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X				Install Compressor		
Date Spudded February 1952	Date Compl. Ready to Prod. 4-11-52	Total Depth 5635	P.B.T.D. 5605					
Elevations (DF, RKB, RT, GR, etc.) 6342	Name of Producing Formation Blanco Mesaverde	Top Oil/Gas Pay 4789	Tubing Depth 5508					
Perforations 4889-5518	Depth Casing Shoe 5" Liner 5560							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. 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 1034 MCFD= D	Length of Test 7 days	Bbls. Condensate/MMCF 20	Gravity of Condensate 45
Testing Method (pilot, back pr.) Deliverability Test	Tubing Pressure (Shut-in) 478	Casing Pressure (Shut-in) 481	Choke Size Open

VI. CERTIFICATE OF COMPLIANCE

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.


J. L. Archer
(Signature)
Drilling and Production Foreman
(Title)
7-14-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 14 1977, 19
BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.
TITLE PETROLEUM ENGINEER DIST. NO. 3

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.