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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

<u>.                                    </u>	T	O TRA	NS	PORT OIL	AND NA	TURAL GA	is				
Operator MESA OPERATING LIMITED PARTNERSHIP						Well API No. 30-045-2748					
Address P.O. BOX 2009, AMA	RILLO,	TEXAS	79:	189							
Reason(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator	Oil Casinghead		Dry	· —	Oth	er (Please expla	in)				
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL A	AND LEA	SE									
Lease Name FC BARNES COM	Well No.   Pool Name, Includin 1 BASIN FR							Lease No.			
Location  Unit Letter N											
Section 15 Township 32N Range 11W , NMPM, San Juan County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)										nt)	
Name of Authorized Transporter of Casing EL PASO NATURAL, GAS C	<del></del> - <del></del>							copy of this form is to be sent) , TEXAS 79998			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp	Rge.	Is gas actuali	ly connected?	When				
If this production is commingled with that f  IV. COMPLETION DATA	rom any othe	r lease or	pool,	give commingli	ng order num	ber:					
Designate Type of Completion -	- (X)	Oil Well	Ì	Gas Well X	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded 8/18/90	Date Compl. Ready to Prod. 10/11/90				Total Depth 3300			P.B.T.D. 3254			
Elevations (DF, RKB, RT, GR, etc.) 6433 GR	4	Name of Producing Formation Fruitland Coal				Top Oil/Gas Pay 2849 *			Tubing Depth 3200'		
Perforations 2849'-3153'								Depth Casing Shoe			
	CEMENTING RECORD			1							
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
12 1/4"	8 5/8"				246'			150 sx Class B			
7 7/8"	5 1/2"				3300'			625 sx Class B			
		3200									
V. TEST DATA AND REQUES OIL WELL (Test must be after re					be equal to o	r exceed top allo	owable for this	depth or be f	or full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tes					lethod (Flow, pu			<del></del>		
Length of Test	Tubing Pressure			Casing Pressure		D)	ECTIVE				
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			DEC 3 1990			
GAS WELL	<u> </u>						Ol	CON	DIV		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate DIST. 3			
155 Testing Method (pitot, back pr.)	24 . Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
Back Pressure	0				570			1	.500"		
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of try knowledge and belief.					Date Approved DEC 0 3 1990						
aldlyr 1. M. M.					By Bur de						
Carolyn L. McKee, Sr. Regulatory Analyst  Printed Name  Title					SUPERVISOR DISTRICT #3						
11/30/90 Date	(806)	·		)() se No.		• <del></del>					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.