RECEIVED. Form C-104 Revised 10-1-78 STATE OF NEW MEXICO HERGY AND MINERALS DEPARTMENT OIL CONSERVATION DIVISIONAN 25 '83 ............ P. O. DOX 2088 DIST. 818 UT 104 SANTA FE, NEW MEXICO 87501 IAMIA FE VV 116 ARTESIA, OFFICE U. C. U . B. LAND OFFICE REQUEST FOR ALLOWABLE AND TRANSPORTER GAS V AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS-OF EMATION Operator OFFICE Mesa Petroleum Co.uP.O. Box 2009 / Amarillo, Texas 79189 Other (Please explain) Keason(s) for liling (Check proper box) Change in Transporter of: New Well Dry Gas Cil Recompletion Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner \_\_\_\_ 11. DESCRIPTION OF WELL AND LEASE Logse No. Kind of Lease veil No. | Pool Name, including Formation NM Signer, Federal of XXXX 36643 West Pecos Slope ABO ROCK FEDERAL 3 Location Feet From The South Line and 1980 East 1980 J Unit Letter Chaves Caunty 23E , NMPM, 8S Range 6 T. mahip Line of Section II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Cit or Condensate X Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 / Houston, Texas 77001 Permian Corporation Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Castinghead Gas or Dry Gas X P.O. Box 2521 / Houston, Texas 77001 Transwestern Pipeline Co. (Attn: Aiklen) Twp. Rqe. is gas actually connected? When Unit Sec. If well produces oil or liquids, give location of tanks. 10-5-81 J ! 6 Yes If this production is commingled with that from any other lease or pool, give commingling order number: Same Res'v. Dill. Res' COMPLETION DATA New Well Wolforet Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Soudded Tubing Depth Name of Producing Formation Top Oll/Gas Pay Elevations (DF, RKB, RT, CR, etc.) Depth Casing Shoe Periorations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top alloable for this depth or be for full 24 hours) . TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Mathod (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Casing Pressure Tubing Pressure Length of Teet Gas - MCF Water - Bbls. Oil - Bhis. Actual Prod. During Test GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shut-is) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION DIVISION I. 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 above is true and complete to the best of my knowledge and belief.

XC: NMOCD-A (0+5) CEN RCDS, ACCTG, ENG,

REM	(FILE)	Mark	·
	(Signature)  REGULATORY COORDINA		

KEGULATORY COORDINATOR (Title) 1-11-83 (Date)

	JAN 2 6 1983 19
APPROVED_	JAN 2 6 1983
.BY	Lestia A. Ciomants
- <u> </u>	Supervisor District II
TITLE	

This form is to be filled in compliance with MULE 1104,

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviation taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of own well name or number, or transporter, or other such change of conditi Separate Forms C-104 must be filled for each pool in multi-consoleted wells.