

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

JUN 3 1981

O. C. D.  
ARTESIA, OFFICEREQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	T
FILE	L
U.S.G.B.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT
OPERATOR	
PRODUCTION OFFICE	

Operator MESA PETROLEUM CO.	
Address 1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## DESCRIPTION OF WELL AND LEASE

Lease Name BARN FEDERAL	Well No. 3	Pool Name, including Formation <del>UNDESIGNATED ABO</del>	Kind of Lease State, <u>Federal</u> or Fee	Lease No. 36652
Location Unit Letter <u>A</u> ; <u>660</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line of Section <u>13</u> Township <u>8S</u> , Range <u>22E</u> , NMPM, <u>CHAVES</u> County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> KOCH OIL COMPANY	Address (Give address to which approved copy of this form is to be sent) P O BOX 1558 BRECKENRIDGE TX 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> TRANSWESTERN PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent) P O BOX 2018 ROSWELL NM 88201
If well produces oil or liquids, give location of tanks.	Unit <u>A</u> Sec. <u>13</u> Twp. <u>8</u> Rge. <u>22</u> Is gas actually connected? <u>NO</u> <u>yes</u> When <u>- 9-15-81</u>

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

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 4-11-81	Date Compl. Ready to Prod. 5-20-81	Total Depth 3412'	P.B.T.D. 3372'					
Elevations (DF, RKB, RT, GR, etc.) 4109.6'	Name of Producing Formation ABO	Top Oil/Gas Pay 2854'	Tubing Depth 2733'					
Perforations 2854'---2940', ABO	Depth Casing Shoe 3411'							

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	1198'	350/150/350/150/300
7 7/8"	4 1/2"	3411'	800/300

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 456	Length of Test 2 1/4 HRS	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pistol, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 825	Casing Pressure (Shut-in) 840	Choke Size -

## 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 (6), TLS, CEN, RCDS, ACCTG, MEC, ROSWELL, LAND, LMC, EEB, TW, K, PARTNERS, FILE, D&M

R. E. Nash  
(Signature)

REGULATORY COORDINATOR  
(Title)

JUNE 1, 1981  
(Date)

## OIL CONSERVATION DIVISION

APPROVED SEP 18 1981, 19  
BY W. A. Gussert  
TITLE SUPERVISOR, DISTRICT II

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 Form C-104 must be filed for each pool in multiple well units.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

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AIR MAIL

SEP 18 1981

O. C. D.  
ARTESIA, NEW MEXICO

NOTICE OF GAS CONNECTION

DATE September 16, 1981

This is to notify the Oil Conservation Division that connection for the  
purchase of gas from the Mesa Petroleum Co. /  
Operator

Barn-Federal  
Lease

Well #3 - Unit Letter "A"  
Well Unit

13-8S-22E, Chaves County  
S.T.R.

Und.  
~~Wildcat~~ (Abo)  
Pool

Transwestern  
Name of purchaser

was made on September 15, 1981

Transwestern Pipeline Company  
Company

 H. N. Aicklen  
Representative

Supervisor Gas Purchase Contract Administration  
Title

cc: Operator  
Oil Conservation Division - Santa Fe