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O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	<input checked="" type="checkbox"/>
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	
Operator	

MESA PETROLEUM CO /

Address
1000 VAUGHN BLDG. / MIDLAND, TEXAS 79701-4493

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 ROUND TOP STATE	Well No. 2	Pool Name, including Formation UNDESIGNATED ABO	Kind of Lease State, Federal or Fee	Lease No. 6675
Location				
Unit Letter I	1980	Feet From The SOUTH	Line and 660	Feet From The EAST
Line of Section 9	Township 7 SOUTH	Range 23 EAST	NMPM, CHAVES	County

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)					
KOCH OIL COMPANY	P O BOX 1558, BRECKENRIDGE, TX 76024					
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)					
TRANSWESTERN PIPELINE CO.	P O BOX 2018, ROSWELL NM 88201					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 9	Twp. 7	Rge. 23	Is gas actually connected? NO	When 12-16-82

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.
		X	X					
Date Spudded 7-13-81	Date Compl. Ready to Prod. 8-22-81	Total Depth 3505'	P.B.T.D. 3178'					
Elevations (DF, RKB, RT, GR, etc.) 3996.9' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 2930'	Tubing Depth 2837'					
Perforations 2930'---3142'	Depth Casing Shoe 3218'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8-5/8"	1620'	600/300/300/380
7 7/8"	4-1/2"	3218'	500/350
	2-3/8"	2837'	-

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.)	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		

GAS WELL

Actual Prod. Test-MCF/D 930	Length of Test 4 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pistol, back pr.) BACK PRESSURE	Tubing Pressure (Shot-in) 900	Casing Pressure (Shot-in) 865	Choke Size 2" ORIFICE WELL TESTER

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.

CC: NMOCD (6), TLS, ACCTG, CEN RCDS, ROSWELL, MEC,
FILE, REM, EEB, CTY, LMC, TW, K, MTS (3), D&M

R. S. Mark

(Signature)

REGULATORY COORDINATOR

(Title)

SEPTEMBER 2, 1981

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 27 1982

BY *Mark*
LAND PARTNERS, OIL AND GAS INSPECTOR

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

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

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DEC 27 1982

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE December 21, 1982

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the Mesa Petroleum Company ✓
Operator

Round Top - State
Lease

Well #2 - Unit Letter "I"
Well Unit

9-7S-23E, Chaves County
S.T.R.

Undesignated (Abo)
Pool

Transwestern
Name of purchaser

was made on December 16, 1982

Transwestern Pipeline Company
Company

H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe