

MAY - 7 1982

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
APTESIA OFFICE

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

Operator
MESA PETROLEUM CO.,

Address
1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701-4493

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name CAMACK FED COM	Well No. 7	Pool Name, Including Formation PECOS SLOPE ABO	Kind of Lease State, <u>Federal</u> or Fee NM	Lease 22615
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>990</u> Feet From The <u>WEST</u> Line of Section <u>12</u> Township <u>5S</u> Range <u>24#</u> , NMPM, <u>CHAVES</u> Co.				

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 CO (ATTN: AIKLEN)	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 2521, HOUSTON, TX 77001
If well produces oil or liquids, give location of tanks.	Unit <u>E</u> Sec. <u>12</u> Twp. <u>5S</u> Rge. <u>24#</u> Is gas actually connected? <u>NO</u> When <u>10-7-82</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	Some Res't.	Diff. F
		X	X					
Date Spudded 2-18-82	Date Compl. Ready to Prod. 4-22-82	Total Depth 4109'	P.B.T.D. 3822'					
Elevations (DF, RKB, RT, GR, etc.) 3879' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 3534' 36 1/2"	Tubing Depth 3544'					
Perforations 3620' --- 3830'	Depth Casing Shoe 4109'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	910'	700/700/200
12 1/4"	8 5/8"	1804'	700/300
12 1/4"	4 1/2"	4109'	300
	2 3/8"	35 1/2'	

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
able 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 1723	Length of Test 4 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 940	Casing Pressure (Shut-in) 820	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.
XCF: NMOCD (6), TLS, CEN RCDS, ACCIG, ROSWELL,
MEC, LAND, D&M, LMC, CTY, EEB, REM, K, TW, FILE,
(PARTNERS)

R. E. Mathis
(Signature)

REGULATORY COORDINATOR

(Title)

5-5-82

OIL CONSERVATION DIVISION

APPROVED OCT 14 1982, 19

BY Original Signed By
Leslie A. Clements
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 deep
well, this form must be accompanied by a tabulation of the dev
tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of o
well name or number, or transporter, or other such change of cond

RECEIVED

NEW MEXICO OIL CONSERVATION DIVISION

OCT 12 1982

P. O. DRAWER "DD"

O. C. D.
ARTESIA, OFFICE

ARTESIA, NEW MEXICO 88210

NOTICE OF GAS CONNECTION

DATE October 8, 1982

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

Camack-Federal Com.
Lease

Well #7- Unit Letter ~~Unknown~~ E
Well Unit

12-5S-24E, Chaves County
S.T.R.

Undesignated (Abo)
Pool

Transwestern
Name of purchaser

was made on October 7, 1982

Transwestern Pipeline Company
Company

H. N. Aicklen

H. N. Aicklen

Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe