

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
ALBUQUERQUE	<input checked="" type="checkbox"/>
EL PASO	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
REGISTRATION OFFICE	<input checked="" type="checkbox"/>
CITY/STATE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Mercury Exploration Co.

Address
1619 Pennsylvania, Fort Worth, Texas 76104

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Gas	Fee	Lease
M&M Federal	3	Abo	State, Federal or Fee			NM 32
Location						
Unit Letter	D	990'	Feet From The	north	Line end	660
		Feet From The	west			
Line of Section	21	Township	6S	Range	23E	NMPM, Chaves Co

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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 Company	P.O. Box 2018, Roswell, NM 88201
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit: A Sec: 21 Twp: 6S Rge: 23E	NO Yes 2-5-85 9-15-84

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.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-4-82	8-31-84	3425'	3050'					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4117' GL 4125' KB	Abo	3012'	2980'					
Perforations			Depth Casing Shoe					
3012-3034' 4SPF .42" holes			3416'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
20"	13-3/8"	50'	Ready Mix surf
11"	8-5/8"	1540'	1060 sx
7-7/8"	4 1/2"	3416'	950 sx
	2-3/8"	2980'	

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 testable 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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
639	72 hours		
Testing Method (prior, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size
back pressure	1100#	1100#	20/64"

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.

Jeff Cook

Agent

(Signature)

(Title)

10-4-84

(Date)

OIL CONSERVATION DIVISION

FEB 13 1985

APPROVED

BY

Original Signed By

Leslie A. Clements

TITLE

Supervisor District II

This form is to be filled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or de well, this form must be accompanied by a tabulation of the de tests taken on the well in accordance with RULE 111.

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

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

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED BY

FEB 11 1985

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE February 8, 1985

This is to notify the Oil Conservation Division that connection for the purchase of gas from the Mitchell Energy Co. ~~MERCURY Exploration Co.~~
Operator

M & M Fed.
Lease

#3
Well Unit

21-6S-23E
S.T.R.

Pecos Slope (Abo)
Pool

Transwestern
Name of Purchaser

was made on February 5, 1985

Transwestern Pipeline Company
Company

Rodney C. Burke Rodney C. Burke
Representative

Jr. Analyst, Contract Administration
Title

cc: Operator

New Mexico Oil Conservation Commission
Oil & Gas Conservation Division
P. O. Box 2088
Santa Fe, NM 87501