		_				
	NO. OF COPIES RECEIVED 4					
	DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104		
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-65		
	FILE /	4	AND	Ellective 1-1-65		
	U.S.G.S.	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL O	SAS		
	LAND OFFICE					
	TRANSPORTER OIL		· · · · · · · · · · · · · · · · · · ·			
	GAS					
	OPERATOR					
1.	PRORATION OFFICE	<u> </u>	· ·			
	Mesa Petroleum Co					
	Address Articles Drives					
		g, Midland, Texas 79701				
	Reason(s) for filing (Check proper bo		Other (Please explain)			
	New Well	Change in Transporter of:		allowable of 100		
		Oil · Dry Go		accumulated test fluid		
	Recompletion Change in Ownership		and release test tankage.			
	Change in Ownership			t tankaye.		
	If change of ownership give name		· .			
	and address of previous owner					
11.	DESCRIPTION OF WELL AND	Well No. Pool Na	me, Including Formation	Kind of Lease		
	Potter Federal Com	1 Wild	dcat (Cisco)	State, Federal or Fee Fee		
	Location	I I		1		
	-	0 North	1985	Eact		
	Unit Letter;;	60Feet From The NorthLir	he and Feet From 7	he <u>Last</u>		
	29	weight 175 Barge 2	27E , NMPM, Eddy	Courter		
	Line of Section 29 , To	ownship 1/3 Range 2	C/E , NMPM, Eddy	County		
	PROVIDE ANONE OF MRANCROF					
111.	Name of Authorized Transporter of O	TER OF OIL AND NATURAL GA	Address (Give address to which approv	ed copy of this form is to be sent)		
	Amoco Production					
	Name of Authorized Transporter of Co		P. O. Box 1183, Housto Address (Give address to which approv	ed copy of this form is to be sent)		
	Nume of Authorized Transporter of O					
		Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n		
	If well produces oil or liquids, give location of tanks.	B 29 17 27	No			
	L					
		ith that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA					
	Besignate Type of Completi		X			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	6-3-77		9300			
		9-9-77 Name of Producing Formation	Top Oil/Gas Pay	8475 (RBP) Tubing Depth		
	Wildcat	Cisco	7695	7633		
				Depth Casing Shoe		
	Perforations 7697', 7698',	7700', 7702', 7704', 771	1', 7716', 7723', 7725',	0000		
	//28', //35', //36', /	739, 7745', 7750', 7757',	7759', 7769', 7775', 7781',	<u>1782' 9298</u>		
				SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEPTHSET			
	17-1/2	13-3/8	353	350		
	11	8-5/8	1694	400+100+75		
	7-7/8	$\frac{4-1/2}{2}$	9298	400+1550		
		2-3/8	7633	1		
V.	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a	fier recovery of total volume of load oil o opth or be for full 24 hours)	and must be equal to or exceed top allo		
	OIL WELL		Producing Method (Flow, pump, gas lif			
	Date First New Oil Run To Tanks	Date of Test	recording method (r. tow, pump, gas it)	-,,		
		Tubing Pressure	Casing Pressure	Choke Size		
	Length of Test	rubing Freesone				
		ell-Bbls.	Water-Bble.			
	Actual Drod. During Test	- DDIS.	1			
-						
			and the second			
	GAS WELL Actual Prod. Teg-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	1000			not determined		
	Testing Method (pitot, back pr.)	24 Tubing Pressure	Casing Pressure	Choke Size		
	back pressure	100	økr _			
/	· · · · · · · · · · · · · · · · · · ·		<u></u>	13/4		
VI.	CERTIFICATE OF COMPLIAN	ICE	OIL CONSERVA	TION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED OCT 121977 . 19			
-	· · · · · ·		TITLE SUPERVISOR DISTRICT II			
	Michael P. Houston		This form is to be filed in a	compliance with RULE 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 deviat			
	• - ·		tests taken on the well in accordance with RULE 111.			
	• -	nature)	tests taken on the well in accor	dance with RULE 111.		
	Division Engineer	nature)	tests taken on the well in accor All aections of this form mus	dance with RULE 111. It be filled out completely for all'		
	Division Engineer	itle)	tests taken on the well in accor All sections of this form mu- able on new and recompleted we	dance with RULE 111. It be filled out completely for all'		

 -		 -	-
11	10		

well name or number, or transporter, or other such change of conditi