

SAFE	/	/
E	/	/
G.S.		
ND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
PERATOR		/
ORATION OFFICE		/

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and
Effective 1-1-65

RECEIVED

AUG 27 1979

Operator
Mesa Petroleum Co
Address
1000 Vaughn Building / Midland, Texas 79701

O.C.C.
ARTESIA, OFFICE

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

R-6328-
Logan Draw Snover

DESCRIPTION OF WELL AND LEASE

Lease Name Yates Federal Com	Well No. 1-Y	Pool Name, including Formation Wildcat / Morrow	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter J	1980	Feet From The South	Line and 1995
Line of Section 20		Township 17S	Range 27E
		NMPM, Eddy	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)
Navajo Crude oil Purchasing Co.	Box 175, Artesia, New Mexico 88210
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)
El Paso Natural Gas Company	Box 1492, El Paso, Texas 79999
If well produces oil or liquids, give location of tanks.	Unit J
	Sec. 20
	Twp. 17
	Rge. 27
Is gas actually connected?	When
No Yes	Est 8-28-79 8-31-79

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. R.
		X	X					
Date Spudded 1-30-79	Date Compl. Ready to Prod. 3-9-79	Total Depth 9230	P.B.T.D. 9169					
Pool Wildcat	Name of Producing Formation Morrow	Top Oil/Gas Pay 8920	Tubing Depth 8863					
Perforations 8921---9069'			Depth Casing Shoe 9230					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	354	375 sx "C"
11"	8-5/8"	1700	400 sx HLW+200sx "C"
7-7/8"	4-1/2"	9230	1200 sx "H"
	2-3/8"	8863	-

V. 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

Tested
to 3
to 2-3/8"
No CEPS

GAS WELL

Actual Prod. Test - MCF/D 2992	Length of Test 4 hrs	Bbls. Condensate/MMCF .3	Gravity of Condensate 51
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure 2480	Casing Pressure 1320	Choke Size 10/64

VI. CERTIFICATE OF COMPLIANCE

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.

R. G. Mark
(Signature)

Regulatory Coordinator
(Title)

August 24, 1979
(Date)

OIL CONSERVATION COMMISSION

SEP 20 1979

APPROVED _____, 19

BY N. A. Gressett

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 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 for able on new and recompleted wells.

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

Separate Forms C-104 must be filed for each pool in r