DISTRIBUTION SANTA FE	REQUEST F	ONSERVATION COMMISSION FOR ALLOWABL AND	Form C-104 Supersedes Old C-104 and C-: RECENVED65
U.S.G.S. LAND OFFICE OIL / ANSPORTER OIL / GAS /	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	as SEP 5.1980 O.C.D.
OPERATOR / PRORATION OFFICE	~	··· .	ARTESIA, OFFICE
Mesa Petroleum Co.			
1000 Vaughn Building Reason(s) for filing (Check proper box)	/ Midland, Texas 79701	Other (Please explain)	
New Well Recompletion Change in Cwnership	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens		ndensate Transporter
If change of ownership give name and address of previous owner	· ·		
DESCRIPTION OF WELL AND L Lease Name Cook Fed Com	well No. Pool Nam	nond Mound Atoka Maria	Kind of Lease State, Federal or Fee
Location Unit Letter <u>H</u> ; 1980	)Feet From TheNorth_Line	and <u>660</u> Feet From T	he East
Line of Section 10 , Tow	nship 165 Range 27	7E , NMPM, Eddy	County
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oll The Permian Corporation me of Authorized Transporter of Casi	or Condensate 🔀	Address (Give address to which approv. P.O. Box 1183, Houston, Address (Give address to which approv	Texas 77001
Northern Natural Gas Co	Unit Sec. Twp. Rge.	P.O. Box 2300. Midland.	
If well produces oil or liquids, give location of tanks.	Н 10 16 27	Yes	8-4-80
f this production is commingled with COMPLETION DATA	h that from any other lease or pool, g	New Well Workover Deepen	Plug Back   Same Restv. Diff. Rest
Designate Type of Completion	n — (X) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST FO	DRALLOWABLE (Test must be af	ter recovery of total volume of load oil a	and must be equal to or exceed top allo
OIL WELL Date First New Oil Run To Tanks	able for this dep Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas lif	
Length of Test	Tubing Pressure	Cosing Pressue	Chcke Size
) Actual Prod. During Test	Oil-Bhis.	Water-Bbls.	Gas-MCF
		<u></u>	q-10-ppf
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Ebla. Condenagte/MMCF	Gravity of Condensate
Testing Method (pitol, back pr.)	Tubing Pressure	Cosing Pressue	Choke Size
CERTIFICATE OF COMPLIANC	CE	OIL CONSERVA	TION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation mmission have been complied with and that the information given ove is true and complete to the best of my knowledge and belief.		APPROVED <u>SEP 8 - 1980</u> , 19 BY U.U. DISTRICE II	
R.E. MATHIS Signature)		TITLE <u>SUPERVISOR</u> DISTRICT. A This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen- well, this form must be accompanied by a tabulation of the deviati	
Regulatory Coordinator		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo	
( <i>T</i> i:		All sections of this form mu able on new and recompleted we	ist be filled out completely for allo alla.