

DISTRIBUTION	
SENT TO	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

AUG 6 1980

O. C. D.  
ARTESIA, OFFICE

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

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Note: Northern Natural and Llano, Inc split production from this well.	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Peterson Federal Com	Well No. 1	Pool Name, Including Formation Logan Draw Morrow	Kind of Lease State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> or Fee
Location Unit Letter G ; 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line of Section 20 , Township 17S Range 27E , NMPM, EDDY Count			

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1320, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 20	Twp. 17	Rge. 27	Is gas actually connected? YES	When 7-29-80

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. R
			X	X					
Date Spudded 9-29-79	Date Compl. Ready to Prod. 11-19-79	Total Depth 9246'		P.B.T.D. 9137'					
Pool LOAGAN DRAW	Name of Producing Formation MORROW	Top Oil/Gas Pay 9033'		Tubing Depth 8947'					
Perforations 9033'----9100'				Depth Casing Shoe 9246'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	358'	358
11"	8-3/8"	1677'	650/200
7-7/8"	5-1/2"	9246'	1100/1050/100
	2-3/8"	8947'	-

IV. 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 5523	Length of Test 4	Bbls. Condensate/MMCF 1315	Gravity of Condensate 55.5
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure 2440	Casing Pressure Pkr	Choke Size 14/64"

V. 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.

XCT: TLS, MEC, PARTNERS, JBH, JWH, NMOCD (6), FILE  
8-5-80

R. E. MATHIS (Signature)  
REGULATORY COORDINATOR

AUGUST 5, 1980

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 7 1980

BY W. A. Gressitt

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 deeper  
well, this form must be accompanied by a tabulation of the deviat  
tests taken on the well in accordance with RULE 111.

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

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

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