

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	1
PRODUCTION OFFICE	1

Operator  
Mesa Petroleum Co. /

Address  
1000 Vaughn Building/Midland, Texas 79701-4493

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 \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name Sink Federal	Well No. 2	Pool Name, including Formation Diamond Mound-Morrow	Kind of Lease State, Federal or Fee NM	Lease No. 4026
Location				
Unit Letter N : 660 Feet From The South Line and 2302 Feet From The West				
Line of Section 9 Township 16 South Range 27 East, 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)
The Permian Corporation	P.O. Box 1183 Houston, Tx. 77001
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)
Northern Natural Gas Co.	P.O. Box 2300 Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	N 9 16 27 No -

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. Res'v.
		X	X					
Date Spudded 7-1-81	Date Compl. Ready to Prod. 9-23-81	Total Depth 8620'	P.B.T.D. 8547'					
Elevations (DF, RKB, RT, GR, etc.) 3497.7' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 8393'	Tubing Depth 8294'					
Perforations 8393'-----8457'			Depth Casing Shoe 8613'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	350'	400
11"	8 5/8"	1651'	250/100/250/200
7 7/8"	4 1/2"	8613'	950/350/350/100/300/400
	2 3/8"	8294'	-

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 allowable 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 CAOF=700	Length of Test 4 hours	Bbls. Condensate/MMCF -	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1770	Casing Pressure (Shut-in) Packer	Choke Size

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.

XC: NMOCD(6), TLS, CEN RCDS, ACCTG, HOBBS, MEC, LAND, D&M, LMC, CTY, EEB, PC, NN, REM, FILE, PARTNERS

R. S. M. A.  
(Signature)

REGULATORY COORDINATOR  
(Title)

11-6-81  
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 20 1982, 19

BY [Signature]

TITLE OIL AND GAS INSPECTOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.