

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

JUN 15 1983

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASG. C. D.
ARTESIA OFFICE

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

Operator
Mesa Petroleum Co. ✓Address
P. O. Box 2009 / Amarillo, Texas 79189

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐Dry Gas ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 8/23/83
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED

EX # 2-661 until 9/23/83

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Hondo "A" State	Well No. 4	Pool Name, Including Formation Undesignated Delaware	Kind of Lease State XXXXXX	Lease No. L-324
Location Unit Letter M : 660 Feet From The South Line and 330 Feet From The West Line of Section 32 Township 20S Range 28E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Pet. Co. (Attn: K. C. Gibson)	Address (Give address to which approved copy of this form is to be sent) 410 Home Savings & Loan, Bartlesville, OK 74004			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 32	Twp. 20S	Rge. 28E
Is gas actually connected?		When		
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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 5-3-83	Date Compl. Ready to Prod. 6-9-83		Total Depth 3808'		P.B.T.D. 2650'			
Elevations (DF, RKB, RT, GR, etc.) 3199.8' GR 3212' RKB	Name of Producing Formation Delaware		Top Oil/Gas Pay 2585'		Tubing Depth 2630'			
Perforations 2585' - 2620'					Depth Casing Shoe 3808'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	590'	100/700
12"	8 5/8"	2440'	1180/150
7 7/8"	5 1/2"	3808'	450
	2 7/8"	2630'	-

TEST DATA AND REQUEST FOR ALLOWABLE (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 6-4-83	Date of Test 6-12-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 20	Casing Pressure 20	Choke Size -
Actual Prod. During Test	Oil - Bbls. 179	Water - Bbls. 74	Gas - MCF 45

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pistol, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	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-A (O+6), CEN RCDS, ACTG, MAT CONT, ENG GAS CONT, MIDLAND, ROSWELL, OPS(FILE), PERMIAN, PHILLIPS, D&M, PARTNERS

R. E. Mathis
(Signature)

REGULATORY COORDINATOR

(Title)

6-14-83

OIL CONSERVATION DIVISION

APPROVED JUN 22 1983

BY Original Signed By
Leslie A. Clements
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 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, lease, or other such change of condition.