NO. OF COPIES RECEIVED		5	
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LAND OFFICE			
TRANSPORTER	OIL	/	
	GAS	/	
OPERATOR			<u> </u>
PRORATION OFFICE		<u> </u>	
Operator	_	_	
Mesa Petroleum Co. 🗸			
Address			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and

Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED APR 1.4 1978 O. C. C. 1000 Vaughn Building, Midland, Texas 79701 Other (Please explain) Reason(s) for filing (Check proper box) New Well Change in condensate transporter Dry Gas Oil Recompletion effective 4-1-78 Condensate X Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Pool Name, Instituting Formation Well No. State, Federal or Fee Federal 2 Nash Unit Location Unit Letter F ; 1350 Feet From The North Line and 1980 <u>West</u> __ Feet From The __ Eddy Range 30E Line of Section 18 , Township 23S , NMPM, County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate P. O. Box 1183, Houston, Texas 77001 The Permian Corporation

Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) P. O. Box 2521, Houston, Texas 77001 Transwestern Pipeline Co. When Sec. Is gas actually connected? Twp. Unit If well produces oil or liquids, May 19, 1976 30E Yes : F ! 18 **| 23S** give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back | Same Restv. Diff. Restv. Deepen Oil Well Gas Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Spudded Date Compl. Ready to Prod. Tubing Depth Top Oil/Gas Pay Name of Producing Formation Pool Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Siz Casing Pressure Tubing Pressure 5 Length of Test Gas - MCI Water - Bbls. Actual Prod. During Test Oil - Bbls. **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Choke Size Casing Pressure Tubing Pressure Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE APR 1 4 1978 APPROVED 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. SUPERVISOR, DISTRICT II TITLE _ This form is to be filed in compliance with RULE 1104.

Division Engineer April 13, 1978 1-4565

,11 F

(Date)

If this is a request for silowable 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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporten or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply MEC INC RRD JWH 10-Partners, 4-NMOCC