

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

FEB 17 1983

Form O-104
Revised 10-1-78REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.

SANTA FE OFFICE

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TRANSPORTER	☒
OIL	☒
GAS	☒
OPERATOR	☒
PRODUCTION OFFICE	

Operator

MESA PETROLEUM CO. ✓

Address

P.O. BOX 2009 / AMARILLO, TX 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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
STRONG FED COM	2E	WHITE CITY PENN MORROW	State Federal ☒ NM	19593
Location				
Unit Letter	F	1650 Feet From The North Line and 1650 Feet From The West		
Line of Section	34	Township 24S	Range 26E	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	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 ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
NATURAL GAS PIPELINE CO. OF AMERICA	P.O. BOX 283, HOUSTON, TX 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	F 34 24 26 YES NO 3/9/83

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-24-82	12-28-82	11,555'	11,472'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3321.4' GR	MORROW	10,846'	10,754'					
Perforations	Depth Casing Shoe							
10,846' --- 11,437'	8498' (LINER 11,554')							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
20"	16"	250'	200/200					
14 3/4"	10 3/4"	1874'	1250/300					
9 1/2"	7 5/8"	8498'	740/350/870/100					
LINER	4 1/2"	11554'	725					

VI. 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1320	4 HOURS	TSTM	--
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size
BACK PRESSURE	3556	PACKER	10/64

I. 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: NMOC-D-A (0+6), CEN RCDS, ACCTG, GAS CONT, RES ENG, PROD RCDS (FILE), MIDLAND, HOBBS, PARTNERS

R. E. Mathis

(Signature)

R. E. MATHIS

REGULATORY COORDINATOR

(Title)

2-15-83

(Date)

OIL CONSERVATION DIVISION

MAR 14 1983

APPROVED _____, 19____

BY _____

Original Signed by

Leslie A. Clement

TITLE _____

Supervisor Planning

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 device tests taken on the well in accordance with RULE 111.

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

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

(Separate) Form O-104 must be filed for each permit on all recompleted wells.