

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JUN 23 1986

OIL CON. DIV.
DIST. 3

I. Operator
Mesa Grande Resources, Inc.

Address
1200 Philtower Building, Tulsa, OK 74103

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal Bearcat	Well No. #1	Pool Name, Including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee Federal	Lease No. NM-43757
Location Unit Letter <u>0</u> ; <u>880</u> Feet From The <u>south</u> Line and <u>1660</u> Feet From The <u>east</u> Line of Section <u>22</u> Township <u>25N</u> Range <u>2W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, N.M. 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 0 22 25N 2W
Is gas actually connected?	When no

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Gregory R. Phillips
(Signature)

Vice President

(Title)

June 18, 1986

(Date)

OIL CONSERVATION DIVISION

JUN 14 1986

APPROVED _____

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE _____

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11/07/86	Date Compl. Ready to Prod. 6/14/86		Total Depth 7907'		P.B.T.D. 7885'				
Elevations (DF, RKB, RT, GR, etc.) 7218 GR	Name of Producing Formation Gavilan Mancos		Top Oil/Gas Pay 6717'		Tubing Depth 7471'				
Perforations 6717'- 6966' (82); 7265'- 7373' (42)						Depth Casing Shoe 7889'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	9 5/8"	36# K-55	516'		265 sx				
8 5/8"	5 1/2"	17# J-55	7889'		1342 sx				
	2 7/8"	4.7# N-80	7471'						

V. 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 6/09/86	Date of Test 6/16/86	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure 38#	Choke Size AOF
Actual Prod. During Test	Oil - Bbls. 89	Water - Bbls. 10	Gas - MCF 92

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size