

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

B.K.

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

Operator Mesa Petroleum Co.	
Address 1660 Lincoln Street, Suite 2800, Denver, CO 80264	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
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 <input type="checkbox"/>

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name South Blanco State 36	Well No. #2	Pool Name, including Formation Lybrook-Gallup	Kind of Lease State, Federal or Fee State NMLG	Lease No. 0134-2
Location				
Unit Letter H	Feet From The 2310'	Line and North	Feet From The 660'	East
Line of Section 36	Township 24N	Range 8W	NMPM, San Juan	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Inland Corp.	P. O. Box 1528, Farmington, NM 87417	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Mesa Petroleum Co.	1660 Lincoln St., #2800, Denver, CO 80264	
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 36
	Twp. 24N	Rge. 8W
	Is gas actually connected? No	When ASAP

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"/>	Some Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 12/26/80	Date Compl. Ready to Prod. 2/12/81		Total Depth 5700'		P.B.T.D. 5680'			
Elevations (D ₁ , RT, GR, etc.) 6930' GL ungraded	Name of Producing Formation Gallup		Top Oil/Gas Pay 5340'		Tubing Depth 5570'			
Perforations 5340'-48', 5455'-61', 5528'-31', 5552'-67'					Depth Casing Shoe 5700'			

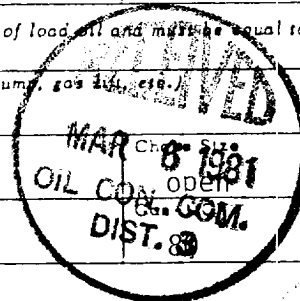
TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8" csg	249'	200 sxs Class "B"
7 7/8"	4 1/2" csg	5700'	751 sxs 50/50 pos, 350
			sxs 65/35 posmix
	2 3/8" tbq	5570'	

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and natural gas equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 2/19/81	Date of Test 2/19/81	Producing Method (Flow, pump, gas lift, etc.) pumping
Length of Test 24 hrs	Tubing Pressure 25 psi	Casing Pressure 25 psi
Actual Prod. During Test 80 BO	Oil - Bbls. 80	Water - Bbls. 0



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

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.

(Signature)

Division Drilling Supervisor
(Title)

March 2, 1981
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 6 1981

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