XC 1/19/75 5 - State 1- archer NO. OF COPIES RECEIVED NEW MEXICO OIL CONSERVATION COMMISSION DISTRIBUTION Supersedes Old C-104 and C-110 Effective 1-1-65 REQUEST FOR ALLOWABLE SANTA FE 1 FILE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LAND OFFICE 1 **IRANSPORTER** GAS 1 **OPERATOR** PROPATION OFFICE Operator Mesa Petroleum Co. Address Amarillo, Texas 79105 P. O. Box 2009 Reason(s) for filing (Check proper box) Other (Please explain) X Change in Transporter of: New Well Dry Gas Recompletion Cil Condensate Change in Ownership If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Kind of Lease Well No. Fool Name, Including Formation Lease No. State, Federal or Fee State Blanco Mesaverde J State Com Location 1680___ __ Feet From The __ East 850 Feet From The South Line and ___ Unit Letter 9W San Juan 31N County , NMPM, Range Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate X 823110 P. O. Box 1528 Farmington, N.M. Inland Corporation Address (Give address to which approved copy of this form is to be sent) or Dry Gas X Name of Authorized Transporter of Casinghead Gas Farmington, N.M. 83 3130 P. O. Box 990 El Paso Natural Gas Sec. Is gas actually connected? Twp. Rge. If well produces oil or liquids, Approx. 2 weeks 0 36 31N 9W No give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Resty. Diff. Resty. New Well Workover Plug Back Gas Well Oll Well Designate Type of Completion - (X) X P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded 56941 5705' 6/14/75 3/4/75 Top Oll/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 56801 4926' 6366' GL Mesaverde Depth Casing Shoe Perferations 5700' <u>4926' - 5673'</u> TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 125 **13-**3/4" 1.62 10-3/4" 7" 8-3/411 288 3443' 245 6-1/8" 4-1/2" 3245'-5700' 2-3/8" 56801 (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 Cil Run To Tanks Date of Test Casing Pressure Tubing Pressure Length of Test

Water - Bbls. Oil-Bbls. Actual Prod. During Test

GAS WELL of Condensate Length of Test Bbls. Condensate/ Actual Prod. Test-MOF/D 1723 3 hrs Casing Pressure Tuhing Pressure Testing Method (pitot, back pr.) 3/4" 446 134 Back Pressure OIL CONSERVATION COMMISSION 2 3 1975

TITLE __

VI. CERTIFICATE OF COMPLIANCE

I heroby 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.

(Signature Operations Manager (Title)

6/19/75...

This form is to be filed in compliance with RULE 1104.

By Original Signed by Emery C. Arnold, 19

If this is a request for allowable for a newly drilled or despened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

SUPERVISOR DIST. #3

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.