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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AMENDED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

xc: K. Stanley, Gen. Rec.
T. L. Slife, NMOCC,
J. Archer, Caribou,
Div. Files, EPNG

Operator Mesa Petroleum Co.	
Address 1660 Lincoln St., #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 checked="" 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 State Com AJ	Well No. 34E	Pool Name, Including Formation Basin Dakota WC Fruitland	Kind of Lease State, Federal or Fee State
Location Unit Letter N ; 1185 Feet From The South Line and 1485 Feet From The West			
Line of Section 36 , Township 32N Range 12W , 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"/> Inland Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1528, Farmington NM 87417
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington NM 87401
If well produces oil or liquids, give location of tanks. possible N	Unit Sec. Twp. Rge. Is gas actually connected? When
	36 32N 12W No

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spud'd January 23, 1980	Date Compl. Ready to Prod. July 9, 1980	Total Depth 7596'	P.B.T.D. 7552'					
Pool	Name of Producing Formation Fruitland	Top Oil/Gas Pay 2480'	Tubing Depth 2422'					
Perforations 2644-50; and 2480-92"	Depth Casing Shoe 7583'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10 3/4"	218'	200
8 3/4"	7"	3300'	300
6 1/2"	4 1/2" Liner	7583'	400

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)

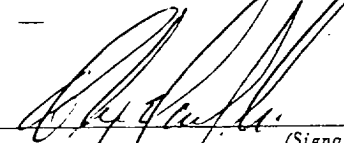
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Mcf

GAS WELL

Actual Prod. Test-MCF/D 1585 AOF	Length of Test 3 hrs	Bbls. Condensate/MMCF 0 / 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) Back Press	Tubing Pressure 1060-120 psig	Casing Pressure 1060-120	Choke Size 3/4"

CERTIFICATE OF COMPLIANCE

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.


(Signature)
Division Drilling Supervisor
(Title)
October 10, 1980
(Date)

OIL CONSERVATION COMMISSION
DEC 17 1980
APPROVED _____, 19____
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 3

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 Sections I, II, III, and VI only 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.