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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

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

Operator Mesa Petroleum Co.	
Address 1660 Lincoln Street, Suite 2800 Denver, Colorado 80264	
Reason(s) for filing (Check proper box)	
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 _____

I. DESCRIPTION OF WELL AND LEASE				
Lease Name State Com AK	Lease No.	Well No. A35E	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee State
Location				
Unit Letter P	1100	Feet From The South	Line and 820	Feet From The East
Line of Section 36	Township 32N	Range 12W	NMPM, San Juan County	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Caribou Four Corners, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 75, Farmington, New Mex. 87417
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 90, Farmington, NM 87401 Attn: Mr. Woo
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. no

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

III. COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded Febr. 28, 1980	Date Compl. Ready to Prod. June 27, 1980	Total Depth 7,717' KB	P.B.T.D. 7,668' KB
Elevations (DF, RKB, RT, GR, etc.) 6,382' KB	Name of Producing Formation Dakota	Top Oil/Gas Pay 7407-7630	Tubing Depth 7,379' KB
Perforations 7630-24; 7582-78'; 7572-62'; 7541-11'; 7507-01'; 7494-90'; 7411-07'			Depth Casing Shoe 7694'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10 3/4"	257' KB	260 SXS.
8 3/4"	7"	3323' KB	450 SXS.
6 1/4"	4 1/2"	7694' KB	515 SXS.

IV. 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 2948	Length of Test 3 hrs.	Bbls. Condensate/MMCF None	Gravity of Condensate None
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure 200	Casing Pressure 200	Choke Size 3/4"

VI. 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.	
7/14/80: TLS, Div., J. Archer, NWPL	
(Signature)	
Division Drilling Supervisor	
(Title)	
July 14, 1980	
(Date)	

OIL CONSERVATION COMMISSION	
JUL 24 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 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.	