

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
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

I. OPERATOR

Operator
Mesa Petroleum Co.

Address
Box 2009, Amarillo, Texas 79105

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate

Well has been shut in since potential testing was completed in November, 1973. Request allowable be reinstated.

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lister	Well No. 1	Pool Name, Including Formation Shoe Bar, North, Strawn	Kind of Lease State, Federal or Fee	Fee
Location				
Unit Letter G	1980 Feet From The North Line and 1980 Feet From The East			
Line of Section 13	Township 16S	Range 35E	NMPM,	Lea 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"/> Texas-New Mexico Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Tipperary Corporation	Address (Give address to which approved copy of this form is to be sent) 500 W. Illinois, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 13	Twp. 16	Rge. 35
Is gas actually connected? When To be connected before producing well. Connection date estimated at 3-25-74.				

If this production is commingled with that from any other lease or pool, give commingling order number: **CTB-249**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v. <input checked="" type="checkbox"/>	Diff. Res'v.
Date Spudded 9-18-73	Date Compl. Ready to Prod. 11-7-73	Total Depth 12,060'	P.B.T.D. 11,466'					
Pool Shoe Bar, North	Name of Producing Formation Strawn	Top Oil/Gas Pay 11,329	Tubing Depth 11,291'					
Perforations 11,336'-44', 11,347'-52', 11,355'-64', 11,368'-71', 11,373'-79', 11382'-							Depth Casing Shoe 11,580'	
TUBING, CASING, AND CEMENTING RECORD 86' (2JSPF)								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		433'		450			
12 1/4"	9 5/8"		4170'		600			
8 3/4"	4 1/2"		11580'		1350			
4 1/2"	2 3/8"		11290'					

V. 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 11-7-73	Date of Test 11-12-73	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 6 hrs	Tubing Pressure 1360	Casing Pressure Zero-pkr	Choke Size 22/64"
Actual Prod. During Test 221	Oil - Bbls. 884	Water - Bbls. ----	Gas - MCF 1913

GAS WELL

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

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.

Michael P. Houston
(Signature)

Production Engineer
(Title)

March 6, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____
Orig. Signat
John
Geology

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 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.