

OIL CONSERVATION DIVISION RECEIVED

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

NOV 24 1982

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA OFFICE

NO. OF LEASES BUSINESS	
DISTRIBUTION	
SANTA FE FILE	<input checked="" type="checkbox"/>
U.S.U.S.	
LAND OFFICE	
TRANSPORTER OIL GAS	<input checked="" type="checkbox"/>
OPERATION	
PRODUCTION OFFICE	

I. Operator
Mesa Petroleum Co. ✓

Address
P.O. Box 2009 / Amarillo, Texas 79189

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

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Acme Com	Well No. 12	Pool Name, including Formation Under Pecos Slope ABO	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>0</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>20</u> Township <u>8 South</u> Range <u>26 East</u> , NMPM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box ¹¹⁸³ 1558 , Breckenridge, TX 76024 ⁷⁷⁰⁰¹
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Co. (Attn: Aicklen)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2521, Houston, TX 77001
If well produces oil or liquids, give location of tanks. Unit <u>0</u> Sec. <u>20</u> Twp. <u>8</u> Rge. <u>26</u>	Is gas actually connected? <u>Yes</u> When <u>- 10-29-82</u>

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
		X	X					
Date Spudded 8-10-82	Date Compl. Ready to Prod. 9-17-82	Total Depth 4800'	P.B.T.D. 4714'					
Elevations (DF, RKB, RT, GR, etc.) 3732' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 4553'	Tubing Depth 4616'					
Perforations 4553' - - - 4639'			Depth Casing Shoe 4761'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
14 3/4"	10 3/4"	962'	700/200					
9 7/8" & 7 7/8"	4 1/2"	4761'	1000/300					
	2 3/8"	4616'						

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	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 615	Length of Test 1 hour	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (prior, back pr.) Back Pressure	Tubing Pressure (Shut-in) 940	Casing Pressure (Shut-in) 940	Choke Size -

VI. 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.

XC: NMOCD-A (0+5), GEN RCDS, ACCTG, GAS CONT, RES ENG, OPS(FILE), MIDLAND, ROSWELL, TW, K, D&M, PARTNERS (5)

R. F. Mathis
(Signature)

Regulatory Coordinator

(Title)

11-23-82

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 04 1982, 19
Original signed by
BY Leslie A. Clements
Supervisor District II

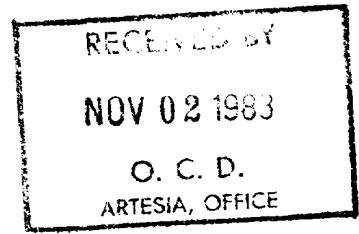
TITLE _____

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 deviated 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 multiple completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210



NOTICE OF GAS CONNECTION

DATE October 31, 1983

This is to notify the Oil Conservation Division that connection for the purchase of gas from the Mesa Petroleum Co. Operator

Acme Com.
Lease

#12 - Unit Letter Unknown
Well Unit

20-8S-26E, Chaves County
S.T.R.

Undesignated (Abo)
Pool

Transwestern was made on October 27, 1983
Name of Purchaser

Transwestern Pipeline Company
Company

Rodney C. Burke Rodney C. Burke
Representative

Jr. Analyst, Contract Administration
Title

cc: Operator
Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501