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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

OCT - 1 1981

O. C. D.

ARTESIA, OFFICE

Operator
Mesa Petroleum Co. ✓
Address
1000 Vaughn Building/Midland, Texas 79701-4493

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Pecos Slope - Abo Gas

Lease Name Cottonwood Federal	Well No. #1	Pool Name, Including Formation Undesignated ABO	Kind of Lease State, Federal or Fee	Federal	Lease No. 15863
Location Unit Letter <u>I</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>26</u> Township <u>6 South</u> Range <u>25 East</u> , NMPM, <u>Chaves</u> County					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Koch Oil Company	P.O. Box 1558 Brechenrider, TX. 76024					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Transwestern Pipeline Co (Attn. Aiklen)	P.O. Box 2521 Houston, Texas 77001					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 26	Twp. 6	Rge. 25	Is gas actually connected? <u>Yes</u>	When <u>11-18-81</u>

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 Spudded 8-23-81	Date Compl. Ready to Prod. 9-23-81	Total Depth 4250'	P.B.T.D. 4170'					
Elevations (DF, RKB, RT, GR, etc.) 3761.6 GR	Name of Producing Formation ABO	Top Oil/Gas Pay 3713'	Tubing Depth 3604'					
Perforations 3713' ---- 3979'			Depth Casing Shoe 4210'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	788'	750/300/200/700
11"	8 5/8"	1720'	750/300/300
7 7/8"	4 1/2"	4210'	650/450
	2 7/8"	3604'	-

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 1725	Length of Test 4 hours	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 880	Casing Pressure (Shut-in) 820	Choke Size -

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: MEC, TLS, CEN Rcds, ACCTG, LAND, D&M, LMC, CTY, MTS (3)
K, TW, EEB, ROSWELL, REM, PARTNERS, FILE, NMCD (6)

R. P. Mathis

(Signature)

Regulatory Coordinator

(Title)

SEPTEMBER 30, 1981

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 23 1981BY W. A. GressettTITLE SUPERVISOR, DISTRICT II

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 allow-
able 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 Form C-104 must be filed for each pool in multiple