

RECEIVED

NOV 16 1981

O. C. D.
ASTORIA OFFICE

| | |
|------------------------|-------------------------------------|
| CO. OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | <input checked="" type="checkbox"/> |
| FILE | <input checked="" type="checkbox"/> |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | <input checked="" type="checkbox"/> |
| OIL | <input checked="" type="checkbox"/> |
| GAS | <input checked="" type="checkbox"/> |
| OPERATOR | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | | | |
|---|---|---------------------------|--------------------------|
| Operator | MESA PETROLEUM CO. ✓ | | |
| Address | 1000 VAUGHN BLDG./MIDLAND, TEXAS 79701-4493 | | |
| 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"/> |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry 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 | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| NED STATE | 3 | UNDESIGNATED ABO | State, Federal or Fee LG | 6693 |
| Location | | | | |
| Unit Letter | L | : 1980 Feet From The SOUTH Line and 660 Feet From The WEST | | |
| Line of Section | 8 | T. wnship 9 SOUTH Range 23 EAST | NMPM, CHAVES | 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, BRECKENRIDGE, TEXAS 76204 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| TRANSWESTERN Natural Gas Co (Attn: Aiklen) | P.O. BOX 2521, HOUSTON, TEXAS 77001 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| | L | 8 | 9 | 23 | NO yes | 12-23-81 |

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 | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| 9-20-81 | 10-22-81 | | 3700' | | 3622' | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| 3938.6' GR | ABO | | 2928' | | 2834' | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| 2928'---2939' | | | | | 3678' | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|-----------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12 1/4" | 8 5/8" | 1115' | 600/250/200/750 |
| 7 7/8" | 4 1/2" | 3678' | 500/350 |
| | 2 3/8" | 2834' | |

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.) | |
| | | 12-23-81 | |
| 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 | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| 598 | 4 hours | - | - |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |
| BACK PRESSURE | 860 | 845 | - |

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: NMCD (6), TLS, CEN RCDS, ACCTG, MEC,
PARTNERS, LAND, HOBBS, D&M, EEB, KOCH,
TW, CTY, LMC, REM, FILE

R. A. M.
(Signature)

REGULATORY COORDINATOR

(Title)

11-11-81

(Date)

OIL CONSERVATION DIVISION

JAN 5 1982

APPROVED _____, 19

BY *W. A. Gressitt*
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 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 Form 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

RECEIVED

JAN 4 1982

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE December 29, 1981

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

Operator

Ned-State
Lease

Well #3 - Unit Letter Unknown
Well Unit

8-9S-23E, Chaves County
S.T.R.

and
Wildcat (Abo)
Pool

Transwestern
Name of purchaser

was made on December 23, 1981

Transwestern Pipeline Co.
Company

H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe