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SEP 11 1981

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

COPIES OF THIS FORM	1
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SANTA FE	1
FILE	1
U.S.G.	1
LAND OFFICE	1
TRANSPORTER	1
OPERATOR	1
PRODUCTION OFFICE	1

MESA PETROLEUM CO ✓

Address  
1000 VAUGHN BLDG. / MIDLAND, TEXAS 79701

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

1. DESCRIPTION OF WELL AND LEASE

Lease Name COMER	Well No. 2	Pool Name, Including Formation UNDESIGNATED ABO	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
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>17</u> Township <u>5 SOUTH</u> Range <u>25 EAST</u> NMPM, <u>CHAVES</u> County				

2. 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 1558 BRECKENRIDGE TX 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> TRANSWESTERN PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent) P O BOX 2018 ROSWELL NM 88201
If well produces oil or liquids, give location of tanks. Unit <u>I</u> Sec. <u>17</u> Twp. <u>5</u> Rge. <u>25</u>	Is gas actually connected? <u>NO</u> When <u>10-2-81</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	Some Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 7-18-81	Date Compl. Ready to Prod. 8-20-81	Total Depth 4350'	P.B.T.D. 4310'					
Elevations (DF, RKB, RT, GR, etc.) 3837.1' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 3686'	Tubing Depth 3586'					
Perforations 3686' --- 3884'			Depth Casing Shoe 4350'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13-3/8"	817'	750/300/200/175/75
11"	8-5/8"	1791'	750/300/300
7-7/8"	4-1/2"	4350'	650/450
	2-3/8"	3586'	

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 1640	Length of Test 4 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) BACK PRESSURE	Tubing Pressure (Shot-in) 910	Casing Pressure (Shot-in) 825	Choke Size 22/64

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

(Signature)

REGULATORY COORDINATOR

(Title)

August 26, 1981

(Date)

OIL CONSERVATION DIVISION

OCT 14 1981

APPROVED

BY

*W. A. Gressett*

TITLE

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

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

OCT 13 1981

O. C. D.  
ARTESIA OFFICE

AIR MAIL

NOTICE OF GAS CONNECTION

DATE October 9, 1981

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

Comer

Lease

Well #2-Unit Letter <sup>1</sup>Unknown  
Well Unit

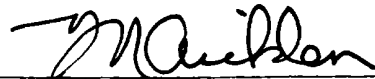
17-5S-25E, Chaves County  
S.T.R.

~~Well~~ (Abo)  
Pool

Transwestern  
Name of purchaser

was made on October 2, 1981

Transwestern Pipeline Company  
Company



H. N. Aicklen

Representative

Supervisor Gas Purchase Contract Administration  
Title

cc: Operator  
Oil Conservation Division - Santa Fe