

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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DEC 8 1981

O. C. D.

ARTESIA, OFFICE

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SANTA FE	
FILE	
U.S.U.B.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATION	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASOperator  
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

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
MILNER FEDERAL	1	UNDESIGNATED ABO	State <u>Federal</u> or Fee NM	29416

Location

Unit Letter I ; 1980 Feet From The SOUTH Line and 660 Feet From The EASTLine of Section 8 Township 8 SOUTH Range 25 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 TX 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 PIPELINE COMPANY (ATTN: AIKLEN)	P O BOX 2521 HOUSTON, TX 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>I</u> <u>8</u> <u>8</u> <u>25</u> <u>NO</u> <u>yes</u> <u>- 1-20-82</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
		<u>X</u>	<u>X</u>					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>10-8-81</u>	<u>11-11-81</u>	<u>4014'</u>	<u>3950'</u>					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>3600.4' GR</u>	<u>ABO</u>	<u>3698'</u>	<u>3588'</u>					
Perforations			Depth Casing Shoe					
<u>3698'---3718'</u>			<u>4009'</u>					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>17 1/2"</u>	<u>13 3/8"</u>	<u>657'</u>	<u>600/400/200/750</u>
<u>11"</u>	<u>8 5/8"</u>	<u>1396'</u>	<u>800/300/300/300</u>
<u>7 7/8"</u>	<u>4 1/2"</u>	<u>4009'</u>	<u>500/500</u>
	<u>2 3/8"</u>	<u>3588'</u>	

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 all  
able 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
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
<u>1052</u>	<u>4 HOURS</u>	<u>-</u>	<u>-</u>
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
<u>BACK PRESSURE</u>	<u>900</u>	<u>860</u>	<u>-</u>

## 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: NMOC (6), TLS, CEN RCDS, ACCTG, ROSWELL, MEC, AND, PARTNERS, MTS (3), D&M, LMC, CTY, EEB, REM, TW, FILE

R. E. Marks  
(Signature)

REGULATORY COORDINATOR

DECEMBER 7, 1981

(Date)

## OIL CONSERVATION DIVISION

APPROVED JAN 27 1982 , 19

BY J. A. Gessert

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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed wells.

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NEW MEXICO OIL CONSERVATION DIVISION

JAN 25 1982

P. O. DRAWER "DD"

O. C. D.

ARTESIA, NEW MEXICO 88210

ARTESIA OFFICE

NOTICE OF GAS CONNECTION

DATE January 21, 1982

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

Milner  
Lease

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

8-8S-25E, Chaves County  
S.T.R.

Wildcat (Abo)  
Pool

Transwestern  
Name of purchaser

was made on January 20, 1982

Transwestern Pipeline Company  
Company

H. N. Aicklen  
Representative

Supervisor Gas Purchase Contract Administration  
Title

cc: Operator  
Oil Conservation Division - Santa Fe