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| PRODUCTION OFFICE | <input checked="" type="checkbox"/> |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS-

RECEIVED

JAN 15 1982

O. C. D.

ARTESIA, OFFICE

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"/> | |
| Recompletion <input type="checkbox"/> | |
| Change in Ownership <input type="checkbox"/> | |
| Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

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

I. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|--|--|-------|
| Lease Name Comer | Well No. 4 | Pool Name, including formation Recess Slope Indesignated Abo | Kind of Lease State, Federal or Fee | Lease |
| Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>5 South</u> Range <u>25 East</u> , NMPM, Chaves Co. | | | | |

I. 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 76024 |
| 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 Co. (Attn: Aiklen) | P.O. Box 2521, Houston, Texas 77001 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. G 18 5S 25E |
| Is gas actually connected? | When No yes ----- 3-3-82 |

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

II. COMPLETION DATA

| | | | | | | | | |
|--|--|--------------------------|-----------------------|----------|--------|-----------|-------------|---------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. F |
| | | X | X | | | | | |
| Date Spudded 11/10/81 | Date Compl. Ready to Prod. 12/16/81 | Total Depth 4300' | P.B.T.D. 4238' | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) 3625' GR | Name of Producing Formation Abo | Top Oil/Gas Pay 3704' | Tubing Depth 3602' | | | | | |
| Perforations 3704' --- 3896.5' | Depth Casing Shoe 4287' | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|-----------------------------------|
| 17-1/2" | 13-3/8" | 800' | 700 HLW/300 THXST/300"C"/300 THXS |
| 12-1/4" | 8-5/8" | 1721' | 750 HLW/300 THXST/300 "C" |
| 7-7/8" | 4-1/2" | 4287' | 500 HLW/500 "C" |
| | 2-3/8" | 3602' | |

III. 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 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 | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |

GAS WELL

| | | | |
|---|----------------------------------|----------------------------------|--------------------------------|
| Actual Prod. Test-MCF/D 1777 | Length of Test 4 hrs. | Bbls. Condensate/MMCF ----- | Gravity of Condensate ----- |
| Testing Method (prior, back pr.) Back Pressure | Tubing Pressure (Shut-in) 930 | Casing Pressure (Shut-in) 870 | Choke Size ----- |

IV. 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,
LAND, CTY, EEB, TW, K, REM, LMC, PARTNERS, FILE,
D&MCathy Hilkerson
(Signature)Production Records Analyst
(Title)1/13/82
(Date)

OIL CONSERVATION DIVISION

MAR 9 1982

APPROVED _____, 19

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

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

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

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

MAR - 8 1982

O. C. D.
ARTESIA OFFICE

NOTICE OF GAS CONNECTION

DATE March 5, 1982

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

Comer

Lease

Well #4 - Unit Letter ^G~~Unknown~~

Well Unit

18-5S-25E, Chaves County

S.T.R.

Pecos Slope ~~Unit~~
Wildcat (Abo)
Pool

Transwestern
Name of purchaser

was made on March 3, 1982

Transwestern Pipeline Company
Company

H. N. Aicklen

H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe