	STATE OF NEW MEXICO	•	1 10 A M 1	Form C-104
اع، · ]	RGY AND MINERALS DEPARTMENT	OIL CONSERVA	•,	RECEIVED Revised 10-1-78
		P. O. DO: SANTA FE, NEW		AN 21 198 <b>3</b>
	LAND OFFICE	REQUEST FOR	ALLOWABLE	O. C. D.
AND ARTESIA, OFFICE				
1.	I AORATION OFFICE		······	
	Mesa Petroleum Co. V			
	P.O. Box 2009 / Amarillo, Texas 79189			
	Keason(s) for filing (Check proper box) Other (Please explain)   New Well Change in Transporter of:			
	Recompletion	Cil Dry Gas Cazinghead Gas Conden		
	If change of ownership give name			
	and address of previous owner	·		
11.	DESCRIPTION OF WELL AND I	JEASF. Well No. Pool Name, Including Fo 9 Undesignated A	RO Kind of L	
		) ondesignated A		oderal grant NM 21970
	Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East			
	Line of Section 19 Tow	nship 7S Range	25Е , ммрм.	Chaves County
Π.	II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Nome of Authorized Transporter of Cil     or Condensate     X     Address (Give address to which approve			pproved copy of this form is to be sent)
	Permian Corporation		P.O. Box 1183 / Houston, Texas 77001 Address (Give address to which approved copy of this form is to be sent)	
	Name of Authorized Transporter of Cas Transwestern Pipeline		P.O. Box 2521 / Hous	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. I 19 7 25	Is gas actually connected?	When 1-17-83
	If this production is commingled wit	<u></u>	give commingling order number:	
V.	COMPLETION DATA Designate Type of Completion - (X)			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Zievations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforationa	·	1	Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
				· · · · · · · · · · · · · · · · · · ·
	1		1 1 1	
2.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed too allo oble for this depth or be for full 24 hours)			
	Date First New Oil Bun To Tarks	Date of Test	Producing Method (Flow, pump, g	as lift, etc.J
	Length of Test	Tubing Pressure	Cosing Pressure	Choke Size
	Actual Prod. During Test	ОШ-БЫя,	Walet - Bbls.	Gas+MCF
	GAS WELL	Length of Test	Bbls. Condenscie/MMCF	Gravity of Condensate
	Teating Wethod (pitol, back pr.)	Tubing Pressure (Shnt-in)	Cosing Pressure (Sbot-12)	Chote Size
				IVATION DIVISION
1.	CERTIFICATE OF COMPLIANCE		JAN 24 1983	
	I hereby certify that the rules and regulations of the Oll Conservation Division have been complied with and that the information given above in true and complete to the best of my knowledge and belief.		Original Signed By	
	XC: NMOCD-A (0+5) CEN RCDS, ACCTG, ENG,		TITLE Supervisor District II	
			This form is to be filed in compliance with RULZ 1104,	
	REM (FILE) R. G. Mart (Signalwa)		If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with HULE 111.	
	(Tille)		All sections of this for able on new and recomplete	m must he fuled out completely for allo
	1-11-83		able on new and recomplete Fill out only Sections I. II. III, and VI for changes of own well manie of number, or transporter, or other such change of condition Second Forms C-104 must be filed for each pool in multiple completed wells.	
	(Date)			