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APR 29 1982

O. C. D.  
ARTESIA, OFFICEREQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.U.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	<input checked="" type="checkbox"/>

Operator  
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)

Change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name RIC	Well No. 6	Pool Name, including Formation PECOS SLOPE ABO	Kind of Lease State, Federal or <u>Fee</u>	Lease
Location	Unit Letter 0	Feet From The 660	Line and SOUTH	Feet From The 1980
	Line of Section 20	T. or S. 6S	Range 25E	CHAVES

## 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 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, TX 77001
Does well produce oil or liquids, give location of tanks.	Is gas actually connected? <u>yes</u> When <u>1-5-83</u>
Unit 0	Sec. 20
Twp. 6S	Rge. 25E

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.
		X	X					
Date Spudded 3-13-82	Date Compl. Ready to Prod. 4-15-82	Total Depth 4150'	P.B.T.D. 3855'					
Elevations (DF, RKB, RT, CR, etc.) 37798' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 3456'	Tubing Depth 3390'					
Perforations 3493' --- 3645'			Depth Casing Shoe 4148'					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	906'	700/200/200
12 1/4"	8 5/8"	1887'	700/300
7 7/8"	4 1/2"	4148'	264

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 CAOF = 720	Length of Test 1	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pilot, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 875	Casing Pressure (Shut-in) 840	Choke Size -

## 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, D&M, LMC, CTY, EEB, REM, K, TW, FILE,  
(PARTNERS)

*R. P. Machie*

(Signature)

REGULATORY COORDINATOR

(Title)

4-27-82

(Date)

## OIL CONSERVATION DIVISION

APPROVED JAN 13 1983, 19BY Original Signed By  
Leslie A. ClementsTITLE 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 devi  
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for a  
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of o  
well name or number, or transporter, or other such change of cond  
Separate Form C-104 must be filled for each pool in mu

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

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JAN 12 1983

O. C. D.  
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE January 10, 1983

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

Operator

RIC

Lease

Well #6-Unit Letter <sup>0</sup>unknown

Well Unit

20-6S-25E, Chaves County

S.T.R.

*Pam Stone*  
Undesignated (Abo)

Pool

Transwestern  
Name of purchaser

was made on January 5, 1983

Transwestern Pipeline Company  
Company

*H. N. Aicklen* H. N. Aicklen  
Representative

Supervisor Gas Purchase Contract Administration  
Title

cc: Operator  
Oil Conservation Division - Santa Fe