OIL CONSERVATION DIVISION®ELLAND     Interview     Mesa Petroleum Co.     Interview     Mesa Petroleum Co.     Interview     Mesa Petroleum Co.     Mesa Petroleum Co.     Interview     Mesa Petroleum Co.
Interview   RECUEST FOR ALLOWABLE   O. C. D.     AND   AND     Authorization office   Authorization office     Image: Anomalian office   Authorizatin office </td
Interview   REQUEST FOR ALLOWABLE   O.C.D.     AND   AND     AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS     Prevention drivet   Authorization drivet     Address   P.O. Box 2009 / Amarillo, Texas 79189     Result for liney (drivet proprison)     New Weil   Image: Source and the sourc
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Image: Production drives   Image: Production drives   Production drives     Messa Petroleum Co.   Messa Petroleum Co.     Asdress   P.O. Box 2009 / Amarillo, Texas 79189     New well   Image: Production drives   Differ (Piesse explain)     In character drives   Image: Production drives   Differ (Piesse explain)     Image: Production drives   Image: Production drives   East     Interest Assertion   Image: Production drives   Production drives   East     Interest Section   Image: Production drives   Production drives   Production drives   Comment drives     Interest Section   Image: Production drives   Production drives   Production drives
Address   P.O. Box 2009 / Amarillo, Texas 79189     Kesson(s) for filing (Carek proper box)   Change in Transporter of:     New Well   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     and address of previous owner   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     If change of ownership give name   Cosinghead Gas   Condensate     Lacotion   0   Cosinghead Facinghead Gas   Condensate     Unit Letter   0   Cosinghead Facinghead Gas   Cosinghead Gas     Lacotion   Co   To maship & South   Range   Cos address (Give address to which approved copy of this form is to be sent)     Nome of Aut
P.O. Box 2009 / Amarillo, Texas 79189     Reson(s) for filing (Check proper box)     New Well   Change in Transporter of:     Recompletion   Oil     Dry Gas   Dry Gas     Change in Ownership   Casinghead Gas     If change of ownership give name   Condensate     and address of previous owner   It change of ownership give name     II. DESCRIPTION OF WELL AND LEASE.   Condensate     Lecenter   New Well     Acme Com   12     Unit Letter   0     Condensate   1980     Feet From The   East     Line of Section   Condensate Give address (Give address to which approved copy of this form is to be sent)     Nome of Authorized Transporter of Casingheed Gas   or Concensate Gas     Nome of Authorized Transporter of Casingheed Gas   or Only Gas Matherized Transporter of Casingheed Gas     Neme of Authorized Transporter of Casingheed Gas   or Day Gas Matherized Transporter of Casingheed Gas     Neme of Authorized Transporter of Casingheed Gas   or Day Gas Matherized Transporter of Casingheed Gas     Neme of Authorized Transporter of Casingheed Gas   or Day Gas Matherized Transporter of Casingheed Gas     Neme of Authorized Transporter of Casingheed Gas   or Day Gas M
Rescon(s) for filing (Check proper Sor)   Change in Transporter of:   Other (Pieace explain)     New Well   Image in Ownership   Coundenance   Other (Pieace explain)     New Well   Image in Ownership   Coundenance   Other (Pieace explain)     If change of ownership give name   Coundenance   Coundenance   Coundenance     II. DESCRIPTION OF WELL AND LEASF.   Image in Ownership   Image in Ownership   Leave Nome     Leave Nome   Image in Ownership   Well No.   Pool Name, including Formation   Kind of Leave     Leave Nome   Image in Ownership   Image in Ownership   Neme of Section   Leave     Locotion   Image in Ownership   South   South   Line and   1980     Unit Letter   0   660   Feet From The   East   Nome   Counderstee     Line of Section   20   T. amship   8 South   Ronge 26 East   NMPM, Chaves   Co     Neme of Authorized Transporter of Calingheed Gas   or Condenance   P.O. Box ±556, Breckenridge, TX 76024   0///     Neme of Authorized Transporter of Casingheed Gas   or Onterstee   P.O. Box ±556, Breckenridge, TX 76024   0//     Transwestern Pipeline Co
New Well   X   Change in Transporter of:     Accompletion   Oil   Dry Gos     Change in Ownership   Cosinghead Gos   Condensale     If change of ownership give name   Cosinghead Gos   Condensale     If change of ownership give name   Cosinghead Gos   Condensale     If change of ownership give name   Cosinghead Gos   Condensale     If change of ownership give name   Well No.   Pool Name, Including Formation   Kind of Lease     Acme Com   12   Undes-, Peccos Slope ABO   State, Federal of Fee   Lease     Location   0   660   Feet From The   South   Insert   1980   Feet From The   East     Location   0   To mship   8 South   Range   26 East   NMPM, Chaves   Co     In DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name, of Authorised Transporter of Costanghead Gos   or Oyr Gos (X)   Address (Give address to which approved copy of this form is to be sent)     Name of Authorised Transporter of Casinghead Gos   or Oyr Gos (X)   Address to which approved copy of this form is to be sent)     Transwestern Pipeline Co.   (Attr: Aicklen)   P.O. Box 2521, Houston, TX 77001     If well
Change in Ownership   Casinghead Cas   Condensate     If change of ownership give name and address of previous owner   If change of ownership give name and address of previous owner     II. DESCRIPTION OF WELL AND LEASE.   Vell No.   Pool Name, including Formation   Kind of Lease     Lease Name   Well No.   Pool Name, including Formation   Kind of Lease   Lease     Acme Com   12   Undest, Pecco Slope ABO   State, Federal of Feet   Lease     Location   0   660   Feet From The South Line and 1980   Feet From The East   Lease     Line of Section   20   T. emphip   8 South Range   26 East NUMPM, Chaves   Co     II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Nome of Authorized Transporter of Casinghead Gas or Condensage (Core address (Give address to which approved copy of this form is to be sent)   Nome of Authorized Transporter of Casinghead Gas or Core Gas (Core address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas or Core Gas (Core address to which approved copy of this form is to be sent)   Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co.   (Attr: Aicklen)   P.O. Box 2521, Houston, TX 77001     If well produces oil or liquide, in thet from any other lease or pool, give Commingling order number:
If change of ownership give name and address of previous owner     II. DESCRIPTION OF WELL AND LEASF.     Lease Nome   Nell No.     Acme Com   12     Undest- Pecos Slope ABO   Stote, Federal of Fee     Locotion   12     Unit Letter
and address of previous owner
II. DESCRIPTION OF WELL AND LEASF.     Lease Name   Well No.   Pool Name, Including Formation   Kind of Lease     Acme Com   12   Undess. Pecos Slope ABO   Stote, Federal of Fee     Location   12   Undess. Pecos Slope ABO   Stote, Federal of Fee     Location   0   660   Feet From The South Line and 1980   Feet From The East     Line of Section   20   T. makip   8 South Range 26 East NMPM, Chaves   Co     II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Norme of Authorised Transporter of CH is form is to be sentified form of Condensate Image in Condensate Image, P.O. Box 1558, Breckenridge, TX 76024   Norme is to be sentified form is to be sentified for address for address to which approved copy of this form is to be sentified form is to be sentified for address for address to which approved copy of this form is to be sentified for address for address to which approved copy of this form is to be sentified for address for address to which approved copy of this form is to be sentified for address for address to which approved copy of this form is to be sentified for address for address to which approved copy of this form is to be sentified for address for address to which approved copy of this form is to be sentified for address for address to which approved copy of this form is to be sentified for address for
Lease Name   well No.   Pool Name, Including Formation   Kind of Lease   Lease     Acme Com   12   Undest-Pecos Slope ABO   State, Federal of Fee   Lease     Location   0   660   Feet From The   South   Line and   1980   Feet From The   East     Line of Section   20   T. makip   8 South   Range   26 East   NMPM,   Chaves   Ca     II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name, of Authorized Transporter of Clil   or Condensate Side   Address (Give address to which approved copy of this form is to be sent)     Koch   Oil Company   P.O.   Box 1556   Breckentildge, TX 76024   20//     Karse of Authorized Transporter of Casinghead Gas   or Dig Gas Si   Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co.   (Attr: Aicklen)   P.O. Box 2521, Houston, TX 77001     If well produces oil or liquids, two is to be 20   8   26   No   10     If this production is commingled with that from any other lease or pool, give commingling order number:   V.COMPLETION DATA   Poil Well   New Well   Peepen   Plug Back   Same Res'v.
Acme Com   12   Undes- Pecos Slope ABO   Stote, Federal of Fee     Locotion   Unit Letter   0   660   Feet From The   South   1980   Feet From The   East     Line of Section   20   T. makip   8 South   Range   26 East   NMPM,   Chaves   Co     MI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Or Condensate X   Address (Give address to which approved copy of this form is to be sent)   Rome of Authorised Transporter of CH   or Condensate X   Address (Give address to which approved copy of this form is to be sent)     Nome of Authorised Transporter of Casinghead Gas   or Condensate X   Address (Give address to which approved copy of this form is to be sent)     Name of Authorised Transporter of Casinghead Gas   or Duty Gas X   Address (Give address to which approved copy of this form is to be sent)     Neme of Authorised Transporter of Casinghead Gas   or Duty Gas X   Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co.   (Attn: Aicklen)   P.O. Box 2521, Houston, TX 77001     If well produces oil or liquids, tive location of tanks.   0   20   8   26     No   Variation   No   Variation   -   10-2   9
Unit Letter
Line of Section 20 T. makip 8 South Range 26 East NMPM, Chaves Co II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Nome of Authorized Transporter of CH or Condensate A Address (Give address to which approved copy of this form is to be sent) Koch OH Company Manual P.O. Box 1558, Breckenridge, TX 76024 Neme of Authorized Transporter of Casinghead Gas or DW Gas Address (Give address to which approved copy of this form is to be sent) Reme of Authorized Transporter of Casinghead Gas or DW Gas Address (Give address to which approved copy of this form is to be sent) Reme of Authorized Transporter of Casinghead Gas or DW Gas Address (Give address to which approved copy of this form is to be sent) Transwestern Pipeline Co. (Attn: Aicklen) P.O. Box 2521, Houston, TX 77001 If well produces oil or liquids, O i 20 i 8 i 26 No Manual Connected? When if this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA 1011 Well Gas Well New Well New Well Workover Deepen Plug Back Same Resty, Diff.
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS     Name of Authorized Transporter of Cilic or Condensate X     Name of Authorized Transporter of Cilic or Condensate X     Name of Authorized Transporter of Casinghead Gas     or Condensate X     Name of Authorized Transporter of Casinghead Gas     or Day Gas X     Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas     or Day Gas X     Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co. (Attn: Aicklen)     P.O. Box 2521, Houston, TX 77001     If well produces oil or liquids, cive location of tanks.     O 1 20   8 26     No   10.20     If this production is commingled with that from any other lease or pool, give commingling order number:     V. COMPLETION DATA
Name of Authorized Transporter of Citic   or Condensate X     Koch Oil Company   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Div Gas X     Name of Authorized Transporter of Casinghead Gas   or Div Gas X     Name of Authorized Transporter of Casinghead Gas   or Div Gas X     Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co. (Attn: Aicklen)     If well produces oil or liquids, give location of tanks.     0   20     8   26     No   -     If this production is commingled with that from any other lease or pool, give commingling order number:     V. COMPLETION DATA
Name of Authorized Transporter of Citic   or Condensate X     Koch Oil Company   Address (Give address to which approved copy of this form is to be sent)     Name of Authorized Transporter of Casinghead Gas   or Div Gas X     Name of Authorized Transporter of Casinghead Gas   or Div Gas X     Name of Authorized Transporter of Casinghead Gas   or Div Gas X     Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co. (Attn: Aicklen)     If well produces oil or liquids, give location of tanks.     0   20     8   26     No   -     If this production is commingled with that from any other lease or pool, give commingling order number:     V. COMPLETION DATA
Koch Oil Company   Will Sec.   P.O. Box 1558, Breckenridge, TX 76024     Name of Authorized Transporter of Casinghead Gas   or Dur Gas X   Address (Give address to which approved copy of this form is to be sent)     Transwestern Pipeline Co. (Attn: Aicklen)   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?     If this production is commingled with that from any other lease or pool, give commingling order number:   -   -     V. COMPLETION DATA   Oil Well   Gas Well   New Well   Workover
Transwestern Pipeline Co. (Attn: Aicklen)   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     If this production is commingled with that from any other lease or pool, give commingling order number:   -
If well produces oil or liquids,   Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When     if well produces oil or liquids,   0   20   8   26   No   10.2   -   10.2   27.2   3     If this production is commingled with that from any other lease or pool, give commingling order numbert   -   10.2   -   10.2   27.2   3     V. COMPLETION DATA   Oil Well   Gas Well   New Well   Workover   Deepen   Plug Back   Same Restr.   Diff.
If well produces oil or liquids,   0   20   8   26   No   -   -   10-29-23     If this production is commingled with that from any other lease or pool, give commingling order numbert   -   10-29-23     V. COMPLETION DATA   Oil Well   Gas Well   Now Well   Workover   Deepen   Plug Back   Same Res'v.   Diff.
V. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff.
V. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff.
Designate Type of Completion - (X) X X
Date SpuddedDate Compl. Ready to Prod.Total DepthP.B.T.D.8-10-829-17-824800'4714'
0-10-02 9-17-02 4000 4714   Elevations (DF. RKB. RT. GR, etc.) Name of Producing Formation Top Oll/Gas Pay Tubing Depth
3732' GR ABO 4553' 4616'
Perforations Depth Casing Shoe 4553' 4639' 4761'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
<u>14 3/4"</u> <u>962'</u> <u>700/200</u> 0 7/9" 5 7 7/8" <u>(10 3/4"</u> <u>962'</u> <u>1000/300</u>
<u>9 7/8" &amp; 7 7/8" 4 1/2" 4761' 1000/300</u>
2 3/8 " 4616'
. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be ofter recovery of total volume of load oil and must be equal to or exceed top
OIL WELL able for this depth or be for full 24 hours)       OIL WELL     Dete for this depth or be for full 24 hours)       Dete First New Oil Run To Tanks     Dete of Test
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Pred. During Test Oil-Bble. Water-Bble. Gas-MCF
GAS WELL       Actual Prod. Test     Bbls. Condensate/AMCF     Gravity of Condensate
615 1 hour
Testing Method (pirot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choice Size   Back Pressure 940 -
I. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION
ΝΩΥ Ω 4 1993
I hereby certify that the rules and regulations of the Oil Conservation AFFROVED Original Signed by
above is true and complete to the best of my knowledge and bellef. BY Lesile A. Clements
XC: NMOCD-A (0+5), CEN RCDS, ACCTG, GAS CONT, RES ENG, OPS(FILE), MIDLAND, ROSWELL, TW,
K DEM PARTNERS (5) . This form is to be filed in compliance with HULE 1104.
R. F. Mattus
tests taken on the well in accordance with HULE TIT.
(Title) able on new and recompleted wells.
1 22 20 I state and with and with and VI for changes of G
If wait want or number, or transporter, or blowr such change of conc
(Date) (D

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NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED OF NOV 0.2 1983 O. C. D. Artesia, Office

NOTICE OF GAS CONNECTION

^

DATE \_\_\_\_\_\_ 0ctober 31, 1983\_\_\_\_\_

This is to notify the Oil Conservation Division that connection for the

purchase of gas from the	Mesa Petroleum Co.			
	Operator			
			1 million	
Acme Com.			_etter <u>Unknown</u>	
Lease		Wel	l Unit	
20-8S-26E, Chaves County		Wines Jundesignated	///↓ + (Abo)	
S.T.R.			Pool	
Iranswestern	was made on	October 27,	1983	
Name of Purchaser				
		Transwestern Pipel	ine Company	
		Company	/	
		Rochen Benne Ri	odney C. Burke	
		Representat	zive	
		Jr. Analyst, Contract A	dministration	
		Title		

cc: Operator Oil Conservation Division P. O. Box 2088 Santa Fe, New Mexico 87501