

NO. OF APPLICANTS	
DISTRIBUTION	
WIA FE	<input checked="" type="checkbox"/>
FE	<input checked="" type="checkbox"/>
U.S.	<input checked="" type="checkbox"/>
NO OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
CRATION	<input checked="" type="checkbox"/>
CRATION OFFICE	<input checked="" type="checkbox"/>
CRATION	<input checked="" type="checkbox"/>

RECEIVED

JUN 25 1982

O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

MESA PETROLEUM CO. ✓

1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701-4493

Reason(s) for filing (Check proper box)	Other (Please explain)
Well <input checked="" type="checkbox"/>	
Completion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter oil: <input type="checkbox"/>	
Oil <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name ROUND TOP STATE	Well No. 5	Pay Name, Including Formation UNDESIGNATED ABO	Kind of Lease (State, Federal or Fee) LG	Lease 6675
Location Unit Letter H ; 1700 Feet From The NORTH Line and 660 Feet From The EAST	Line of Section 9	T. Township 7S	Range 23E	NMPM, CHAVES Col

SIGNATURE 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
Well produces oil or liquids, location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
H 9 7S 23E	NO - 10/2/82

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. <input type="checkbox"/>
Spudded 4-23-82	Date Compl. Ready to Prod. 5-31-82	Total Depth 3402'	P.B.T.D. 3356'					
Locations (DF, RKB, RT, GR, etc.) 3968.8' GR	Name of Producing Formation ABO	Top Oil/Gas Pay 2907'	Tubing Depth 3031'					
Locations 2907' --- 3103'	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	1476'	700/200/1700
7 7/8"	4 1/2"	3402'	500/500
	2 3/8"	3031'	-

TEST DATA AND REQUEST FOR ALLOWABLE 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)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

WELL

Prod. Test-MCF/D 955	Length of Test 4	Bbls. Condensate/MCF -	Gravity of Condensate -
Flowing Method (prior, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 850	Casing Pressure (Shut-in) 853	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 is true and complete to the best of my knowledge and belief.
D: NMOC (6), TLS, CEN RCDS, ACCTG, ROSWELL, EC, LAND, D&M, LMC, CTY, EEB, REM, K, TW, FILE, PS (3), (PARTNERS)

R. E. Markes
(Signature)

REGULATORY COORDINATOR

(Title)

6-4-82

(Date)

OIL CONSERVATION DIVISION

DEC 16 1982

APPROVED _____, 19

BY W. H. Walker

TITLE OIL AND GAS INSPECTOR

This form is to be filled 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 device 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 oil well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filled for each pool in multi-completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

RECEIVED

P. O. DRAWER "DD"

DEC 10 1982

ARTESIA, NEW MEXICO 88210

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE December 8, 1982

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

OperatorRound Top-StateWell #5-Unit Letter ²⁶ ~~unknown~~LeaseWell Unit:9-7S-23E, Chaves County*W. P. S. S. Abo*
~~Indesignated (Abo)~~S.T.R.PoolTranswesternDecember 3, 1982Name of purchaserwas made onTranswestern Pipeline Company
Company*H. N. Aicklen*H. N. AicklenRepresentativeSupervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe