

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

RECEIVED

AUG 21 1982

O. C. D.

ARTESIA, OFFICE

REQUEST 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.S.	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATION	<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 ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE **R-7708 10/25/84**

Lease Name <b>SHELLY FEDERAL</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>S. PECOS SLOPE UNDESIGNATED ABO GAS</b>	Kind of Lease State, Federal or Fee <b>NM</b>	Lease No. <b>33944</b>
Location Unit Letter <b>M</b> ; <b>660</b> Feet From The <b>SOUTH</b> Line and <b>990</b> Feet From The <b>WEST</b> Line of Section <b>24</b> Township <b>9S</b> Range <b>24E</b> , NMPM. <b>CHAVES</b> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <b>KOCH OIL COMPANY</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. BOX 1558, BRECKENRIDGE, TX 76024</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>TRANSWESTERN PIPELINE CO (ATTN: AIKLEN)</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. BOX 2521, HOUSTON, TX 77001</b>
If well produces oil or liquids, give location of tanks. Unit: <b>M</b> Sec. <b>24</b> Twp. <b>9S</b> Rge. <b>24E</b>	Is gas actually connected? <b>NO</b> When <b>- 10-26-83</b>

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	Some Rest.	Diff. Res.
		<b>X</b>	<b>X</b>					
Date Spudded <b>7-17-82</b>	Date Compl. Ready to Prod. <b>8-17-82</b>	Total Depth <b>3950'</b>	P.B.T.D. <b>3763'</b>					
Elevations (DF, R&B, RT, CR, etc.) <b>3569', 3582.5' RKB</b>	Name of Producing Formation <b>ABO</b>	Top Oil/Gas Pay <b>3435'</b>	Tubing Depth <b>3340'</b>					
Perforations <b>3435' --- 3533'</b>			Depth Casing Shoe <b>3812'</b>					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>17 1/2"</b>	<b>13 3/8"</b>	<b>404'</b>	<b>250/200/950</b>
<b>12 1/4"</b>	<b>8 5/8"</b>	<b>969'</b>	<b>700/200/60</b>
<b>7 7/8"</b>	<b>4 1/2"</b>	<b>3812'</b>	<b>725/500</b>
	<b>2 3/8"</b>	<b>3340'</b>	

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 oil 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 <b>992</b>	Length of Test <b>4</b>	Bbls. Condensate/MMCF <b>-</b>	Gravity of Condensate <b>-</b>
Testing Method (pilot, back pr.) <b>BACK PRESSURE</b>	Tubing Pressure (shot-in) <b>902</b>	Casing Pressure (shot-in) <b>910</b>	Choke Size <b>-</b>

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, GEN RCDS, ACCTG, ROSWELL, MEC, LAND, D&M, LMC, CTY, EEB, REM, K, TW, FILE, MTS (3), (PARTNERS)

**R. E. MONTGOMERY**  
(Signature)

REGULATORY COORDINATOR

(Title)

**8-19-82**

(Date)

OIL CONSERVATION DIVISION

**NOV 01 1983**

APPROVED **Original Signed By** \_\_\_\_\_, 19\_\_\_\_\_  
BY **Leslie A. Clements**  
Supervisor District II

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and V for changes of owner, well name or number, or transporter, or other change of condition.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED BY

OCT 31 1983

O. C. D.

ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE October 27, 1983

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

Shelly Fed.

Lease

<sup>M</sup>  
#1 Unit Letter ~~Unknown~~  
Well Unit

27-95-205 Chaves, County  
S.T.R.

Und. Abo

Pool

Transwestern

Name of Purchaser

was made on October 26, 1983

Transwestern Pipeline Company  
Company

Rodney C. Burke Rodney C. Burke  
Representative

Jr. Analyst, Contract Administration  
Title

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