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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
RECEIVED BY AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes OIA C-104 and C-105  
Effective 1-1-85

OCT - 1 1985

O. C. D.  
ARTESIA, OFFICE

Operator **Mesa Petroleum Co.**

Address **P.O. Box 2009, Amarillo, Texas 79189**

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

If change of ownership give name and address of previous owner \_\_\_\_\_

I. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Mesa State Com</b>	Well No. <b># 3</b>	Pool Name, including Formation <b>Diamond Mound-Atoka Morrow</b>	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter <b>L</b>	<b>1980</b>	Feet From The <b>south</b>	Line and <b>660</b>	Feet From The <b>west</b>
Line of Section <b>31</b>	Township <b>15S</b>	Range <b>28E</b>	, NMPM, <b>Chaves</b> County	

II. 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)					
<b>The Permian Corporation</b>	<b>P.O. Box 1183, Houston, Texas</b>					
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)					
<b>Northern Natural Gas Co.</b>	<b>P.O. Box 4420, Houston, Texas</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>L</b>	Sec. <b>31</b>	Twp. <b>15S</b>	Rge. <b>28E</b>	Is gas actually connected? <b>Yes</b>	When <b>9/27/85</b>

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<b>X</b>	<b>X</b>					
Date Spudded <b>4-11-85</b>	Date Compl. Ready to Prod. <b>6-8-85</b>		Total Depth <b>9260'</b>		P.B.T.D. <b>9171'</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>3621' GR</b>	Name of Producing Formation <b>Norrow</b>		Top Oil/Gas Pay <b>9042'</b>		Tubing Depth <b>8945'</b>			
Perforations <b>9042'-9050'</b>					Depth Casing Shoe			
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>962'</b>		<b>840</b>			
<b>12 1/4"</b>	<b>8 5/8"</b>		<b>1855'</b>		<b>900</b>			
<b>7 7/8"</b>	<b>4 1/2"</b>		<b>9259'</b>		<b>1245</b>			
	<b>2 3/8</b>		<b>8945</b>					

V. 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>3755</b>	Length of Test <b>24 hours</b>	Bbls. Condensate/MMCF <b>17</b>	Gravity of Condensate <b>61.5°</b>
Testing Method (pilot, back pr.) <b>back pressure</b>	Tubing Pressure (shut-in) <b>2650</b>	Casing Pressure (shut-in)	Choke Size <b>23/64"</b>

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Regulatory Clerk

(Title)

September 30, 1985

(Date)

XC: WF, CR, Reg., RZN, Acctg, Midland, Partners

OIL CONSERVATION COMMISSION

APPROVED **OCT 4 1985**, 19

BY **Original Signed By**  
**Les A. Clements**

TITLE **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 deepened well, this form must be accompanied by a tabulation of the data tests taken on the well in accordance with RULE 1104.

All sections of this form must be filled out completely for all oil and gas wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of data.

OIL CONSERVATION DIVISION

DRAWER DB

ARTESIA, NEW MEXICO

RECEIVED BY

OCT 3 - 1985

O. C. D.

ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE: September 30, 1985

This is to notify the Oil Conservation Division that connection for the purchase of gas from the Mesa Petroleum ✓, Mesa State Com #3,  
Operator Lease

L, 31-15S-28E, Diamond Mound Morrow, Northern Natural Gas Company  
Well Unit S.T.R. Pool Name of Purchaser

was made on 9/30/85.

Northern Natural Gas Company  
Purchaser

Robert M. Walker  
Representative

Gas Contract Specialist  
Title

cc: To Operator  
Oil Conservation Division-Santa Fe