

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

REPORTER	OIL
REPORTER	GAS
NATION	
NATION OFFICE	

MESA PETROLEUM CO

1000 VAUGHN BUILDING/MIDLAND TEXAS 79701-4493

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

Range of ownership give name  
Address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

## DESCRIPTION OF WELL AND LEASE

Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
LISTER	1	Shoe Bar Wolfcamp North	State, Federal or Fee	

Well Letter G ; 1980 Feet From The North Line and 1980 Feet From The EastLine of Section 13 Township 16S Range 35E , NMPM, LEA County

## SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Co.	P O Box 1510, Midland Texas 79701
of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Tipperary Corp	500 W. Illinois, Midland, Texas 79701
It produces oil or liquids, Location of tanks.	Unit. Sec. Twp. Rge. Is gas actually connected? When
<u>G</u> <u>13</u> <u>16S</u> <u>35E</u>	<u>Yes</u>

If production is commingled with that from any other lease or pool, give commingling order number: CTB-249

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
	<u>X</u>					<u>X</u>		
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>W/O 4-28-82</u>	<u>7-20-82</u>	<u>12,060</u>	<u>11,205'</u>					
Measurements (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>3976' RKB</u>	<u>Wolfcamp</u>	<u>9,611'</u>	<u>10,579'</u>					
Measurements			Depth Casing Shoe					
<u>10,288---10,557'</u>			<u>11,580</u>					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	433	450
12 1/4"	9 5/8"	4170	350/250
8 3/4"	4 1/2"	11580	1350

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 all  
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.)	
<u>7-20-82</u>	<u>8-1-82</u>	<u>Pump</u>	
Time of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>24 hours</u>	<u>-</u>	<u>-</u>	<u>-</u>
Prod. During Test	Oil-Bble.	Water-Bble.	Gas-MCF
	<u>7</u>	<u>4</u>	<u>0</u>

## WELL

Prod. Test-MCF/D	Length of Test	Bble. Condensate/MCF	Gravity of Condensate
Flow Method (prior, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	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.NMOCD(6), TLS, MEC, LAND, CEN RCDS, ACCTG, CTY,  
REM, BOSWELL, FILE PARTNERS, EEB, TW, K, LMC

R. E. MATHIS

(Signature)

REGULATORY COORDINATOR

(Title)

8-30-82

(Date)

## OIL CONSERVATION DIVISION

APPROVED

SEP 10 1982

BY Edwin A. SeayTITLE OIL & GAS INSPECTOR

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 deviate  
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-  
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own-  
er, well name or number, or transporter, or other such change of condition.Separate Forms C-104 must be filed for each pool in multi-  
completed wells.