

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Mesa Petroleum Co.	
Address P. O. Box 2009, Amarillo, Texas 79105	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input 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"/>
To reflect gas connection date.	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lister	Lease No.	Well No. 1	Pool Name, Including Formation Shoe Bar, North, Strawn	Kind of Lease State, Federal or Fee	Fee
Location					
Unit Letter G ; 1980 Feet From The North Line and 1980 Feet From The East					
Line of Section 13 Township 16S Range 35E , NMPM, Lea County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Tipperary Corporation	Address (Give address to which approved copy of this form is to be sent) 500 W. Illinois, Midland, Texas 79701					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 13	Twp. 16	Rge. 35	Is gas actually connected? Yes	When April 22, 1974

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-18-73	Date Compl. Ready to Prod. 11-7-73	Total Depth 12,060'		P.B.T.D. 11,466'					
Elevations (DF, RKB, RT, GR, etc.) 3962.6 GL	Name of Producing Formation Strawn	Top Oil/Gas Pay 11,329		Tubing Depth 11,291'					
Perforations 11336-44, 11347-52, 11355-64, 11368-71, 11373-79, 11382-86 (2JSPF)		Depth Casing Shoe 11,580'							
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'		600				
8 3/4"	4 1/2"		11580'		1350				
4 1/2"	2 3/8"		11290'						

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-7-73	Date of Test 4-27-74	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 1450	Casing Pressure pkp	Choke Size 18/64
Actual Prod. During Test	Oil-Bbls. 606	Water-Bbls. -----	Gas-MCF 1080

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

Michael P. Houston
(Signature)

Production Engineer
(Title)

May 7, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 10 1974, 19

BY [Signature]

TITLE [Signature]

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 deviation tests taken on the well in accordance with RULE 111.

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

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.