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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OF	TICE
Operator	

	SANTA FE FILE		COMSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-119 Effective 1-1-65	
	U.S.G.S.  LAND OFFICE  OIL	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
I.	OPERATOR  PROPATION OFFICE	-			
	MESA PETROLEUM CO.				
	Address .				
	Box 2009, At Reason(s) for filing (Check proper box New Well Recompletion Change in Ownership	Change in Transporter of:  Oll Dry Go Casinghead Gas Conde	us Wolfcamp (20	ng Allowable for 00 bbls)	
	If change of ownership give name and address of previous owner	Casinginal Cas			
II.	DESCRIPTION OF WELL AND LEASE				
	Lease Name Gilmore	1	me, Including Formation h Shoe Bar (Wolfcamp)	Kind of Lease State, Federal or Fee Fee	
	Location				
	Unit Letter M; 740	O Feet From The south Lin	ne and 740 Feet From	The west	
	Line of Section 7 , To	wnship 16S Range	36E , NMPM, Lea	County	
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS		
	Name of Futhorized Transporter of Cil	or Condensate	Address (Give address to which appro	·	
	Permian Corporat Name of Authorized Transporter of Ca		Box 1183, Houston, T Address (Give address to which appro		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. M 7 16S 36E	Is gas actually connected? When		
	If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA				
	Designate Type of Completic	on - (X)	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
	11-8-73		11,593	10,627	
	North Shoe Bar	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 10, 512	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17 1/2''	13 3/8"	3971	400	
	12 1/4" 8 3/4"	9 5/8'' 5 1/2''	4160' 10,663'	725	
<b>T</b> 7	TROTE DATE AND DECLIFET F	OD ALLOWADIE (Tourselle	for a second sec	and must be saved to as exceed top allow-	
V.	TEST DATA AND REQUEST FOR ALLOWABLE  (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  Date of Test  Producing Method (Flow, pump, gas lift, etc.)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (riow, pump, gus in	iji, eic.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
		1			
	GAS WELL	Transh of Task	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCr	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI.	CERTIFICATE OF COMPLIAN	CE		ATION GOMMISSION	
	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.		APPROVED, 19		
			BY		
	·		TITLE		
	Michael P. K	Vouston		compliance with RULE 1104.	
	(Sign	ature)	If this is a request for allowell, this form must be accompated tests taken on the well in acco	wable for a newly drilled or deepened anied by a tabulation of the deviation rdance with RULE 111.	

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

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

Secured Forms C-104 must be filed for each pool in multiply December 27, 1973 (Date)