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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

I. Operator  
Mesa Petroleum Co.  
Address  
P. O. Box 2009, Amarillo, Texas 79105  
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)  
Casinghead Gas MUST NOT BE  
PRODUCED AFTER 11/74  
EXCEPT AS EXCEPTION TO R-4070  
IS OBTAINED.

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chambers	Well No. 1	Pool Name, Including Formation Shoe Bar, No., Wolfcamp	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter O ; 555 Feet From The South Line and 2085 Feet From The East Line of Section 7 Township 16S Range 36E , 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 checked="" 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 O	Sec. 7	Twp. 16	Rge. 36	Is gas actually connected? No	When Construction in Progress To be conn. by 4-15-74.

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded Feb. 5, 1974	Date Compl. Ready to Prod. March 24, 1974		Total Depth 11,600'		P.B.T.D. 10,622'			
Elevations (DF, RKB, RT, GR, etc.) 3950 GR - 3963 RKB	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 10,509'		Tubing Depth 10,439'			
Perforations 10,509'-514'	10,520'-530'				Depth Casing Shoe 10,710'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		365'		400			
12 1/4"	9 5/8"		4159'		600			
8 3/4"	4 1/2"		10710'		1200			
4 1/2"	2 3/8"		10439'		----			

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 March 24, 1974	Date of Test March 28, 1974	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 12 hrs	Tubing Pressure 1175 psi	Casing Pressure pkr	Choke Size 18/64
Actual Prod. During Test 315 BO x Tr. wtr.	Oil - Bbls. 630	Water - Bbls. Trace	Gas - MCF 1060

GAS WELL

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

April 4, 1974  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19

BY \_\_\_\_\_

TITLE \_\_\_\_\_

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 tested wells.