NO. OF COPIES REC	EIVED	1	
DISTRIBUTIO	ЭИ		
SANTA FE			
FILE			
U.S.G.S.	·		
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
Operator			
Mose I	20+201		-

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

	U.\$.G.\$.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL	GAS			
	LAND OFFICE	ACTIONIZATION TO THE		2 0, 10			
	TRANSPORTER OIL						
	GAS						
	OPERATOR						
1.	PRORATION OFFICE						
	Operator Defends Operator						
	Mesa Petroleum Co.						
	904 Gihls Tower West, Midland, Texas 79701						
	Reason(s) for filing (Check proper box)  Other (Please explain)						
	New Well	Change in Transporter of:	To indicate ac	tual gas connection			
	Recompletion	Dev Cos   date					
	Change in Ownership Casinghead Gas Condensate						
	If change of ownership give name						
and address of previous owner							
**	DESCRIPTION OF WELL AND I	FASE	R-502	9			
11.	Lease Name	Well No. Pool Nam	ne including Formation of Knowles pp Drinkard	Kind of Lease			
	West Knowles	1 Shi	<del>pp</del> Drinkard	State, Federal or Fee Fee			
	Location			_			
	Unit Letter P ; 66	0 Feet From The South Line	e and 600 Feet Fro	om The East			
	7.4 _	mship 16S Range	37E , NMPM,	Lea County			
	Line of Section 34 , Tow	mship 105 Hange	3/L /				
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s				
	Name of Authorized Transporter of Oil	or Condensate	Address (Give dauress to which up	proved copy of this form is to be sent)			
	Koch Oil Co.  Name of Authorized Transporter of Cas		Box 2256, Wichita,	proved copy of this form is to be sent)			
	Phillips Petroleu	Unit Sec. Twp. Rge.	311 Phillips Buildin Is gas actually connected?	When			
	If well produces oil or liquids, give location of tanks.	P 34 16 37	Yes	May 17, 1975			
		h that from any other lease or pool,	give commingling order number:				
	COMPLETION DATA			Plug Back   Same Res'v. Diff. Res'v.			
	Designate Type of Completio	$\operatorname{Orl} Vell$ Gas Well	New Well Workover Deepen	Flag Back Same 1155 V			
		Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.			
	Date Spudded 11-25-74	2-9-75	13,250	8417			
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Shipp	Drinkærd	8200	8290			
	Perforations			Depth Casing Shoe			
	8330'-8358', 83	90'-8412'	OF THE PERSON				
			DEPTH SET	SACKS CEMENT			
	HOLE SIZE	CASING & TUBING SIZE	405	400			
	$\frac{17\frac{1}{2}}{12\frac{1}{4}}$	13 3/8 9 5/8	4890	200			
	$\frac{124}{8\frac{1}{2}}$	51/5	8670	905			
		2 3/8	8290				
V.	The AND DECLIEST FOR ALLOWARIE (Test stirt be after recovery of total volume of load oil and must be equal to or exceed top allow-						
	OIL WELL						
	Date First New Oil Ault To Fulles						
	2-9-75 Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	20	225	pkr.	30/64			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF			
	505 BO x 0 BW x 309 MC	F <b>8</b> 06	0	371			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Sorder Lines 1 Apr. MO1 \ D	V					
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
VI. CERTIFICATE OF COMPLIANCE		CE	OIL CONSER	RVATION COMMISSION			
		_	APPROVED , 19				
	Cii been complied to	regulations of the Oil Conservation with and that the information given	700	he A Pand			
	above is true and complete to the	e best of my knowledge and belief.	BY TOTAL STATE OF THE STATE OF				
-	· <del>-</del>	TITLE SUPERVISOR DISTRICT !					

This form is to be filed in compliance with RULE 1104.

Division Engineer (Title)

May 16, 1975

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