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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. State Oil & Gas Lease No.

## SUNDRY NOTICES AND REPORTS ON WELLS DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Mesa Petroleum Co.	8. Farm or Lease Name West Knowles
3. Address of Operator 904 Gihls Tower West, Midland, Texas 79701	9. Well No. 6
4. Location of Well UNIT LETTER <u>F</u> <u>1880'</u> FEET FROM THE <u>North</u> LINE AND <u>1880'</u> FEET FROM THE <u>West</u> LINE, SECTION <u>35</u> TOWNSHIP <u>16S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat West Knowles Drinka
15. Elevation (Show whether DF, RT, GR, etc.) 3769' GR 3782' RKB	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Drilled 7-7/8" hole to 8635' on 7-24-75. (WLTD 8640') Ran csg as follows:

1277.04' 4½" 11.6# K-55 LT&C (35) Top  
5302.73' 4½" 10.5# K-55 ST&C (156)  
2095.23' 4½" 11.6# K-55 LT&C (63)  
8675.00' set @ 8640' RKB

Installed centralizer on mid shoe joint and on top of joint #2, 4, 6 & 8. Ran guide shoe with differential float collar 1 joint up. Cemented w/180 sx TLW with 5# salt and 1/4# celloflake followed by 200 sx Class "C". Had good returns while cementing. PD @ 4:00 a.m. 7-26-75. Will test casing after rigging up completion unit estimated 7-31-75.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Michael P. Houston TITLE Division Engineer DATE 7-28-75  
APPROVED BY John R. [Signature] TITLE [Signature] DATE JUL 31 1975

CONDITIONS OF APPROVAL, IF ANY:

XC: 3 NMOCC, 1-JLF, 1-MEC, 1-File, WI Partners, D+M + M+N

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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: 904 Gihls Tower West, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" 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"/>	Request testing allowable of 1000

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name West Knowles	Well No. 6	Pool Name, including Formation West Knowles, Drinkard	Kind of Lease State, Federal or Fee	Fee
Location: Unit Letter <u>F</u> ; <u>1880</u> Feet From The <u>north</u> Line and <u>1880</u> Feet From The <u>west</u> Line of Section <u>35</u> , Township <u>16S</u> Range <u>37E</u> , NMPM, <u>Lea</u> 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"/> Koch Oil Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2256, Wichita, Kansas 67202					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 311 Phillips Bldg., Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 35	Twp. 16	Rge. 37	Is gas actually connected? No	When

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

V. 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 7-1-75	Date Compl. Ready to Prod. --		Total Depth 8640'		P.B.T.D. 8595'			
Pool West Knowles	Name of Producing Formation Drinkard		Top Oil/Gas Pay 8286		Tubing Depth 8250 est.			
Perforations 8293-8308, 8312-8322, 8336-8374					Depth Casing Shoe 8640			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13-3/8		348		375			
11	8-5/8		4200		400			
7-7/8	4-1/2		8640		180 + 200			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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)

Division Engineer  
(Title)

July 28, 1975  
(Date)

XC: 4NMOCC, 1JLF, 1-MEC, 1-File,  
WT Partners D+M M+1

OIL CONSERVATION COMMISSION

APPROVED

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 Sections I, II, III, and VI only 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.