

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

NO. OF COPIES DESIRED	
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SANTA FE	
FILE	
U.S.C.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Mesa Petroleum Co.	
Address P. O. Box 2009 / Amarillo, Texas 79189	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" 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"/>
Test oil allowable 50 BO	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## DESCRIPTION OF WELL AND LEASE

Lease Name Jog State Com	Well No. 1	Pool Name, including Formation Wildcat Bone Springs	Kind of Lease <u>State</u> Federal or Fee LG	Lease No. 3379
Location Unit Letter <u>L</u> <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>2</u> Township <u>24S</u> Range <u>33E</u> , NMPM, <u>Lea</u> County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183/Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 2	Twp. 24	Rge. 33	Is gas actually connected? No	When

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

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" 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 3-20-84	Date Compl. Ready to Prod. 3-27-84		Total Depth 12,513'		P.B.T.D. 11,840'			
Elevations (DF, RKB, RT, GR, etc.) 3627' GR	Name of Producing Formation Bone Springs		Top Oil/Gas Pay 11,599'		Tubing Depth			
Perforations 11,610'---26'; 11,599'---663'; 11,703'---11,781'					Depth Casing Shoe 12,513'			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
20"	16"	798'	750
14 3/4"	10 3/4"	5250'	4550
9 1/2"	7 5/8"	12,513'	1150

## 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 (psia, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

NOTE: Well is going to be plugged.

XC: NMOC (O+3), CEN RCDS, ACCTG, PROD RCDS, PROD, HOBBS-PROD

Regulatory Coordinator

8-27-84

## OIL CONSERVATION DIVISION

AUG 29 1984

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

BY Eddie W. SeayTITLE Oil & Gas Inspector

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,

RECEIVED

AUG 28 1984

U.S. DEPT. OF JUSTICE  
POSTAL SERVICE