STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	41760	Ι.	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.A.			
LANG OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			_

OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-01-78 Format 08-01-83

U.S.G.S. LAGG OFFICE	AC	NTA FE, NE	W MEXICO 87501			
OPERATOR CAS	AUTHODIZAT		OR ALLOWABLE AND SPORT OIL AND NATI		EB 1911	113 113
<u>[. </u>	TOTTIONIZAT	ION TO TRANS	PORT OIL AND NATI	URAL GAS		,
Mesa Operating Limit	ted Partn	ership				
P.O. Box 2009, Amar	illo, Tex	as 79189				
Resson(s) for filing (Check proper box) New Well Recompletion Change in Ownership	Change in Trans Oil Casinghead		Other (Please) Ory Gas Condensate	se explain)		
If change of ownership give name Mesa and address of previous owner Mesa	Petroleu	m Co., P.0	. Box 2009, Ama	arillo, Texas 79	3189	
II. DESCRIPTION OF WELL AND LEA	ASE					
State Com		Name, including P Blanco Pic	tured Cliffs	Kind of Lease State, Federal or Fee	State	E3671-1
Location Unit Letter 1 : 1650	Feet From The	south t	ne and790	Feet From The	east	
Line of Section 16 Township	29N	Ronge	8W . NMP	M, San Juan		County
III. DESIGNATION OF TRANSPORT	ER OF OIL A		L GAS Address (Give address	to which approved copy o	of this form is	io be sent)
Name of Authorized Transporter of Casinghed El Paso Natural Gas Co.	id Gas 🗀 of	Dry Gas 🔀	1	to which approved copy of		to be sent/
If well produces oil or liquids, give location of tanks.		Twp. Rge. 29 8	Is gas actually connec	ted? When		
I this production is commingled with that	from any other	r lease or pool,	give commingling orde	er number:		
NOTE: Complete Parts IV and V on r	reverse side if	necessary.	OIL C	CONSERVATION D	YEBN1 (9.1986
ereby certify that the rules and regulations of the Oil Conservation Division have en complied with and that the information given is true and complete to the best of			19			
		TITLE SUPERVISOR DISTRICT TO 3				
	umm	ingo	I F	o be filed in compliant		- · · ·
(Signature) Carolyo L. Cummings, Regulatory Clerk 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.						
February 14, 1986			able on new and re	•	•	•
(Date)			well name or numbe	Sections I. II. III. and r, or transporter, or other a C-104 must be filed	r such chang	e of condition.
			completed wells.	toa mast na tited	or water be	ser in mentibly

XC: NMOCD-(0+4), WF, CR, Reg.