STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT**

Manager of Field Operations

March 22, 1988

(Title)

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U.3.6.4.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAB		
OPERATOR			
PRORATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 **Revised 10-01-78** Format 06-01-83

LAND OFFICE			
TRAMSPORTER OIL	NAR > .		
OPERATOR REQUEST FO	R ALLOWABLE OIL CO.		
PROBATION OFFICE	ND VIL COA.		
I. AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS		
Operator	R ALLOWABLE OIL CON. DIV.)		
MECA CDANDE DECOMBREC INC			
MESA GRANDE RESOURCES, INC.			
1200 Philtower Building, Tulsa, (OK 74103		
Reeson(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
Recompletion W Oil D	ry Gas		
Change in Ownership Casinghead Gas C	ondensate		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including F	ormation Kind of Lease Lease No.		
Marauder Well No. Pool Name, Including F	B		
	OS State, Federal or Fee FEE		
Unit Letter N 1840 Feet From The West Line and 805 Feet From The South			
Line of Section 8 Township 25N Range	2W , NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil XX or Condensate Address (Give address to which approved copy of this form is to be sent)			
Giant Refining Company	P. O. Box 256 Farmington, NM 87499		
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, Unit Sec. Twp. Rgs. give location of tanks. N 8 25N 2W	is gas actually connected?		
If this production is commingled with that from any other lease or pool,	give commingling order number:		
NOTE: Complete Parts IV and V on reverse side if necessary.			
CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 1988			
bereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.	STANDA NAME OF THE PROPERTY OF		
-,	SUPERVISOR DISTRICT # 5		
MI DOLAN	TITLE SUPERVISOR DISTRICT # 35		

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 completed wells.