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.

C-35-31N-12W

MESA OPERATING LTD. PARTNERSHIP FEDERAL "G" #1

		F	EDERAL "G"	井工				
STATE OF NEW MEXICO	_ ^	leed 1	FeD. L	_ABe C				
ENERGY AND MINERALS DEPARTMENT	Γ					Form C-104		
DISTRIBUTION	OII	CONSER	VATION	NACION		Revised 10-01- Format 06-01-		
SANTA PE	Oil		O A 110N L	DIVISION	Fr 195 AC	Page 1	_	
U.S.G.S.	s		NEW MEXIC	3 87501	以正设置	JVE	N	
LANG OFFICE				3 37301	LIN .		U	
TRAMSPORTER OIL				,	SEP1 2	! 1988 - 🖺	**	
OPERATOR		REQUEST	FOR ALLOWA	BLE				
PROBATION OFFICE	ALITHOPIZ	ATION TO TO	AND UNSPORT OIL A	ND MATHRAI	QIL CON	1. DIV		
I				AND NATURAL	\ DIST			
MESA OPERATING LI	IMITED PART	NERSHIP		*e				
P.O. BOX 2009, AM	MARILLO, TE	XAS 79189			· · · · · · · · · · · · · · · · · · ·			
Reason(s) for filing (Check proper box)			10	ther (Please exp	riain)			
New Well	_							
Recompletion Oil			Dry Gas	Dry Gas Effective 8/15/88				
X Change in Ownership	Casingh	rad Gas	Condensate					
If change of ownership give name and address of previous owner	3eta Develo	pment Co.	, 238 Petro	leum Plaza	a, Farmingto	n, NM 874	01	
II. DESCRIPTION OF WELL AND		al Name Jackydia	- Farmer					
FEDERAL "G" Well No. Pool Name, Including 1 Basin Dako			-	. 1	d of Lease te, Federal or Fee	Federal	1540-01	
Location	— 					rederar	1340-01	
Unit Letter C : 990	Feet From T	he North	Line and 16	00 F	eet From TheW	est		
Line of Section 35 Town	nahip 31N	Range	12W	, NMPM,	San Juan		County	
III. DESIGNATION OF TRANSPO			RAL GAS		·			
Name of Authorized Transporter of Oll or Condensate 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 or Dry Gas			!	Address (Give address to which approved copy of this form is to be sent)				
Sunterra Gas Gathering	Co.		P.O. Bo	x 26400 A	lbuquerque,	New Mexico	0 87125	
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 31N 12W		ily connected?	When			
					<u> </u>			
If this production is commingled with NOTE: Complete Parts IV and V			ol, give commin	gling order num	iber:	· · · · · · · · · · · · · · · · · · ·	<u></u>	
		.,	ll .					
VI. CERTIFICATE OF COMPLIAN	CE			OIL CONS		/ISION		
I hereby certify that the rules and regulation	is of the Oil Conser	vation Division ha	IVE APPROV	F D) [F T 1200	•	_	
been complied with and that the information my knowledge and belief.	of	73.1) d.	/ · ''	¥			
My knowledge and benef.			BY	الميدو	· Colony			
			TITLE	SUPERV	ISION DISTRI	CT # 3		
austa (un	mm Ma	2	This	form is to be f	iled in compliance	with RULE	1104.	
Regulatory Analyst	m)		_ If this well, this	is a request i	for allowable for a accompanied by a in accordance with	newly drilled	or deepens	
September 9, 1988	,		- All se		form must be filled		ly for allow	
			11					

(Date)