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O. C. D. ARTESIA, OFFICE

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| BANTA FE | | 1/ | |
| FILE | | | |
| U.S.G.A. | | | |
| LAND OFFICE | | <u> </u> | |
| TRANSPORTER | OIL | V | |
| | GAS | U | |
| OPERATOR | | ~ | |
| PROBATION OFFICE | | | |

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | AUTHORIZATION TO TRANSP | ORT OIL AND NATO | THE ONE | | | |
|--|--|--|---|------------------------------------|--|--|
| Mesa Operating Limi | ted Partnership/ | | | | | |
| P.O. Box 2009, Amar | illo, Texas 79189 | | | | | |
| Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership | | Other (Please | explain) | | | |
| I DESCRIPTION OF WELL AND LEASE | | | | | | |
| ROCK FEDERAL | Well No. Pool Name, Including Fo 5 WEST PECOS SI | OPE ABO | Kind of Lease State, Federal or Fee | NM 36643 | | |
| Location B 990 | Feet From The NORTH Line | 1980 | _ Feet From TheEAST | | | |
| Line of Section 18 Township | , 8S Range | 23E , NMPM | CHAVES | County | | |
| Name of Authorized Transporter of Casinghe Transwestern Pipeline Co | or Condensate Frinian (Eff. 9 / 1 /87) ad Gas ar Dry Gas Frinian (Sec. Twp. Rge. 18 8 23 | P.O. BOX 1183 Address (Give address in P.O. BOX 2521 Is gas actually connected YES | / Houston, Texas / When / 5-28-81 | 77001 | | |
| VI. CERTIFICATE OF COMPLIANCE Under the control of the Oil Conservation Division have OIL CONSERVATION DIVISION To a proper certify that the rules and regulations of the Oil Conservation Division have APPROVED FEB 28 1986 | | | | Posted ID-3 2.28-86 Nami Chy | | |
| been complied with and that the information give my knowledge and belief. R. E. Mathis | en is true and complete to the best of | TITLE Supe | A. Clements rvisor District II be filed in compliance with seat for allowable for a newly be accompanied by a tabular | drilled or deepened | | |
| REGULATORY AGENT February 14, 1986 | | teets taken on the | well in accordance with RUL this form must be filled out o | E 111. | | |
| (Date) | | Fill out only t well name or number | ections I. II. III. and VI for , or transporter, or other such C-104 must be filed for ea | change of condition. | | |