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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT TO OF LOFTIC MISTING DISTRIBUTION SANTA PE FILE U.S.B.J. LAND OFFICE TALISPONTER OIL PERATOR PROMATION OFFICE I.	FEB 1 O. ARTESL OIL C SAN	P. O. BO ITA FE, NEV REQUEST FOI A	ATION DIVIS x 2006 MEXICO 875  RALLOWABLE ND PORT OIL AND N	501	Form C-104 Revised 10-01- Format 08-01-6 Page 1	
Commer Mesa Operating Limi	ted Partne	ership				
Address P.O. Box 2009, Amar	illo, Texa	as 79189				
Reeson(s) for filing (Check proper box)	Change is Trans		y Gas	Please explain)		
Change in Ownership	Casingheed		ondens ate			
Il change of awnership give name Mesa and address of previous ownerMesa	Petroleum	n Co., P.O.	Box 2009,	Amarillo, Texas 7	79189	
II. DESCRIPTION OF WELL AND LE	ASE Well No.   Pool !	Name, Including F	ormation	Kind of Lease		Lease No.
FOREMAN FEDERAL	1		Slope Abo	State, Federal or Fee	NM	14754
Location B 660	_Feet From The	NORTH	• and	Feet From The	AST	
Line of Section 17 Townshi	<b>6</b> S	Range	25E	мем, Chav	es	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oll	or Condens	ate 🚺	Address (Give add			be sentj
Permian Corporation Permian (Eff. 9 / 1 / 87) P.O. Box 1183/Houston, Texas 77001   Name of Authorized Transporter of Casinghead Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent)   Name of Authorized Transporter of Casinghead Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent)   Name of Authorized Transporter of Casinghead Gas or Dry Gas (X) P.O. Box 2521/Houston, Texas 77001						
Transwestern Pipeline Co		the second s	P.U. DOX Z			
It well produces oil or liquids.		6 25	YES	8-24	-81	
If this production is commingled with the	at from any othe	er lease or pool.	give commingling	order number:		1.1.00-
NOTE: Complete Parts IV and V on	reverse side if	necessary.			To	led ID-3 - 28-86
VI. CERTIFICATE OF COMPLIANCE			0	IL CONSERVATION I FEB 28 1986	Division 2 1.	ame lette
I hereby 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.			BY	Original Signed By	······································	19
	TITLE					
		•		Supervisor District II is to be filed in complia		
Aller (Signature)	umm	ingo	well, this form	a request for allowable for must be accompanied by	a tabulation of	the deviation
Carolyn L. Cummings, Regulatory Clerk			teets taken on	the well in accordance the of this form must be fi	with RULE 111.	•
February 14, 1986			able on new a	nd recompleted wells. nly Sections I. II. III. s	nd VI for chan	res of owner,
(Dete)			well name or n	umber, or transporter, or ot Forms C-104 must be fil	her such change	of condition.
			completed well		-a tet eren be	musispiy

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