	RECEIVED BY FEB 12 1986	1			
STATE OF NEW MEXICO	O. C. D.				
ENERGY MO MINERALS DEPARTMENT	ARTESIA, OFFICE			rm C-104	
		Fo	vised 10-01-78 rmat 06-01-63		
DIL CONSERVATION DIVISION				ge 1	
P. 0. 80X 2088 PILE P. 0. 80X 2088 SANTA FE, NEW MEXICO 87501					
LAND OFFICE					
TRANSPORTER OIL	REQUEST FOR ALLOWABLE				
OPERATOR					
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
Mesa Operating Limited Partnership					
Address P.O. Box 2009, Amarillo, Texas 79189					
Reeson(s) for filing (Check proper box)					
New Weil Change is Transporter of:					
Recempletion Oil Dry Gas X Change in Quinership Casinghead Gas Condensate					
If change of ownership give name Mesa Petroleum Co., P.O. Box 2009, Amarillo, Texas 79189					
I. DESCRIPTION OF WELL AND LEAS	E II No. Pool Name, Including Fo	rmation	Kind of Lease	Lease No.	
BOSWELL STATE	1 West Pecos		State, Federal or Fee Stat	e LG 9571	
Location					
Unit Letter J 1650 Feet From The south Line and 1650 Feet From The east					
	-	21E , NMPM	Chaves	County	
Line of Section 30 Township 5	S Range	<u>21E</u> , (MPM	, 		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oli or Condensate X					
Permian Corporation	P.O. Box 1183/Houston, Texas 77001 Address (Give address to which approved copy of this form is to be sent)				
P.O. Box 2521/Houston, Texas 77001					
Transwestern Pipeline Co.	Sec. Twp. Rge.	is gas actually connecte	id? When		
If well produces oil or liquids, give location of tanks.	30 5 21	No	ا 		
If this production is commingled with that from any other lease or pool, give commingling order number:					
Voted IU 3					
VI. CERTIFICATE OF COMPLIANCE FEB 28 1986					
I hereby certify that the rules and regulations of the	APPROVED	ED #0 1300	, 19		
been complied with and that the information given is true and complete to the best of my knowledge and belief.		BYOriginal Signed By			
		Les A. Clements			
		TITLESupervisor District 11			
		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
(Signature)		well, this form must	be accompanied by a tabu	lation of the deviation	
Carolyn L. Cummings, Regulatory Clerk		All sections of	well in accordance with Ri this form must be filled ou		
February 14, 1986		sble 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.			
(Dete)		e, or transporter, or other suc C-104 must be filed for			
	1	completed wells.			