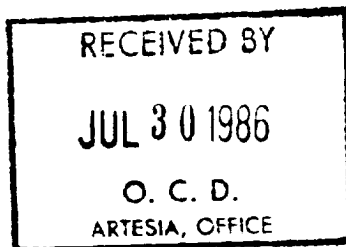


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT



Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

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OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Mesa Operating Limited Partnership

Address P.O. Box 2009, Amarillo, Texas 79189

Reason(s) for filing (Check proper box) Other (Please explain)

☐ New Well Change in Transporter of: ☐ Oil ☐ Dry Gas

☐ Recompletion ☐ Casinghead Gas ☐ Condensate

☒ Change in Ownership Effective date of change of operator:
7/1/86

If change of ownership give name and address of previous owner Pioneer Production Corporation, P.O. Box 2542, Amarillo, TX 79189

II. DESCRIPTION OF WELL AND LEASE

Shugart

Lease Name <u>EDWARDS-FEDERAL</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Yates 7 Rivers Queen Grayburg</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
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Location

Unit Letter 0 : 990 Feet From The south Line and 2310 Feet From The east

Line of Section 9 Township 18S Range 31E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Koch Oil Co.</u>	<u>P.O. Box 1558, Breckenridge, Texas 76024</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Co.</u>	<u>P.O. Box 6666, Odessa, Texas</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>0</u> Sec. <u>9</u> Twp. <u>18S</u> Rge. <u>31E</u>	<u>Yes</u> <u>10/1/61</u>

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.

VI. CERTIFICATE OF COMPLIANCE

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.

Carolyn L. Cummings
(Signature)
Carolyn L. Cummings, Regulatory Clerk
(Title)
July 29, 1986
(Date)

OIL CONSERVATION DIVISION
AUG - 7 1986

APPROVED _____, 19____
BY _____
Original Signed By
Les A. Clements
TITLE Supervisor District II

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.