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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|---|---|
| I. Operator Kaiser Francis Oil Co. | |
| Address P.O. Box 21468, Tulsa, Oklahoma 74121-1468 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership | Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Condensate <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Effective 4-1-87 |

If change of ownership give name and address of previous owner: Mesa Operating Limited Partnership, P.O. Box 2009, Amarillo, TX 79189

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|---|--|------------------------|
| Lease Name Edwards-Federal | Well No. 1 | Pool Name, including Formation Yates 7 Rvrs Queen Grayburg | Kind of Lease State, Federal or Fee Federal | Lease No. LC029389A |
| 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 checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Oil Co. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, Texas 76024 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) Post 20-3 5-8-87 chp p name | |
| If well produces oil or liquids, give location of tanks. | Unit 0 | Sec. 9 |
| | Twp. 18S | Rge. 31E |
| | Is gas actually connected? No | |

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.

C. Jan Falkenberg
(Signature)
Production Administrator
(Title)
4/24/87
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 5 1987, 19
Original Signed By
BY Joe 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.