

RECEIVED BY

APR 17 1986

O. C. D.

MESA OFFICE

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.S.L.	<input checked="" type="checkbox"/>
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Mesa Operating Limited Partnership ✓	
Address P.O. Box 2009, Amarillo, Texas 79189	
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	NOTE: Well never drilled - permit should have expired Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner Mesa Petroleum Co., P.O. Box 2009, Amarillo, Texas 79189

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Fisher Fed Com	Well No. 1	Pool Name, including Formation W/c ato	Kind of Lease State, Federal or Fee	Lease No. NM 20345
Location Unit Letter <u>e J</u> : <u>660</u> <sup>1980</sup> Feet From The <u>South</u> <sup>Line and</sup> <u>1980</u> Feet From The <u>west</u> <sup>EAST</sup> Line of Section <u>13/4</u> Township 6S Range 26E, NMPM, Chaves County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
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)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
Is gas actually connected?	When	Chg. Op. Name

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.



Regulatory Clerk

April 15, 1986

(Title)

(Date)

## OIL CONSERVATION DIVISION

APPROVED APR 23 1986, 19BY Original Signed ByTITLE Les A. Clements

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.

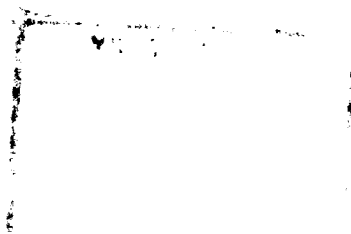
All sections of this form must be filled out completely for allowable on new and recompleted wells.

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.

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

 Part ID-3  
 9-23-88  
 Exp. INI



127 10 1944  
George (George)  
George (George)  
George (George)