STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		1	
TRANSPORTER	OIL		
	GAS		
OPENATOR			_
PRORATION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83

DEC 13 1985

PROPATION OFFICE	OR ALLOWABLE AND ISPORT OIL AND NATURAL GAS OIL CON. DIV.		
I. AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS DIST. 3		
Mesa Grande Resources, Inc.			
Address 1200 Philtower Bldg., Tulsa, OK 74103			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
	Dry Gas		
A Change in Ownership Casinghead Gas	Condensate		
If change of ownership give nacve and address of previous owner Northwest Pipeline Corp., P.O. Box 8900, Salt Lake City, Utah 84108			
II. DESCRIPTION OF WELL AND LEASE			
FEDERAL Well No. Pool Name, Including I	Ledde No.		
Location 22 GAVILAN	PC State Federal or Fee NM 01806		
Unit Letter J: 1840 Feet From The SOUTH LE	ine and 1690 Feet From The EAST LINE		
Line of Section 32 Township 26 N Range	Rio Arriba County		
IL DESIGNATION OF TRANSPORTER OF OIL AND NATURA	I CAS		
Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corp.	P.O. Box 8900, Salt Lake City, Utah 84108		
Name of Authorized Transporter of Casinghead Gas (3) or Dry Gas (1) El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Farmington, NM 87401		
If well produces oil or liquids, Unit Sec. Twp. Rgs. give location of tanks.	Is gas actually connected? When Yes		
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	OIL CONSERVATION DIVISION		
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	APPROVES 12 1005 19		
my knowledge and belief.	BY_Srand (9)		
	TITLE SUPERVISOR DISTRICT		
(m) like in	This form is to be filed in compliance with RULE 1104.		
OIL Philaips	If this is a request for allowable for a newly drilled or despende		
Operations Representative	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
(Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
(Date) 2 10 85	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.		