STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	EMES	1	
DISTRIBUTION			
SANTA PE			1
FILE			
V.8.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply completed wells.

OPERATOR {	OR ALLOWABLE AND SPORT OIL AND NATURAL GAS EEB 1 9 1330		
Mesa Operating Limited Partnership	OIL CONTRACT		
P.O. Box 2009, Amarillo, Texas 79189	DIST. 3		
Change in Ownership Casingheat Gas	Other (Please explain) Ory Gas Condensate		
If change of ownership give name Mesa Petroleum Co., P.O. Box 2009, Amarillo, Texas 79189 II. DESCRIPTION OF WELL AND LEASE			
STATE COM R 14A BLANCO MES	Ledse No.		
Unit Letter 0 : 870 Feet From The SOUTH Line of Section 36 Township 30N Range	Ine and 1850 Feet From The <u>FAST</u> QW , NMPM, <u>SAN JUAN</u> County		
MI. DESIGNATION OF TRANSPORTER OF OIL AND NATURA Name of Authorized Transporter of OIL PERMIAN CORPORATION Name of Authorized Transporter of Casinghead Gas or Dry Gas	P.O. BOX 1183 / HOUSTON, TEXAS 7700] Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)		
EL PASO NATURAL GAS CO. If well produces oil or liquids, qive location of tanks. Unit Sec. Twp. Rqs. 0 36 30 9	P.O. BOX 990 / FARMINGTON, NEW MEXICO 87401 Is gas detually connected? When 8-30-75		
If this production is commingled with that from any other lease or pool, 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. Signature, REGULATORY AGENT February 14, 1986	OIL CONSERVATION DIVISION: 9 1986 APPROVED SUPERVISOR DISTRICT # 3 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.		
(Date) Fill out only Sections I. II. III, and VI for changes of or well name or number, or transporter or other such change of condi			

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