## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		
SANTA PE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	016	
	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

PRODATION OFFICE	R ALLOWABLE ND PORT OIL AND NATURAL GAS
Mesa Operating Limited Partnership	
P.O. Box 2009, Amarillo, Texas 79189	
	Other (Please explain)  ry Gas ondensate
If change of ownership give name Mesa Petroleum Co., P.O. and address of previous owner Mesa Petroleum Co., P.O.	Box 2009, Amarillo, Texas 79189
II. DESCRIPTION OF WELL AND LEASE  Lease Name STATE COM M  9A  BLANCO MESAV	
Location Unit Letter P 990 Feet From The SOUTH Lin	E 1545, 44 ne and 990 Feet From The EAST 26-2/
Line of Section 36 Township 32N Range	11W , NMPM, SAN JUAN County
Name of Authorized Transporter of Oil or Candensate  PERMIAN CORPORATION  Name of Authorized Transporter of Casinghead Gas or Dry Gas  EL PASO NATURAL GAS CO.  If well produces oil or liquids, que location of tanks.  P 36 32 11	Address (Give address to which approved copy of this form is to be sent)  P.O. BOX 1183 / HOUSTON, TEXAS 77001  Address (Give address to which approved copy of this form is to be sent)  P.O. BOX 990 / FARMINGTON, NEW MEXICO 87401  Is gas actually connected?   When   YES   9-23-75
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	CIL 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 my knowledge and belief.	APPROVED.  FEB 19 1986  SUPERVISOR DISTRICT #(3)
REGULATORY AGENT	This form is to be filed in compliance with RULE 1104.  If this is a request for sllowable 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.
February 14, 1986	All sections of this form must be filled out completely for allowable on new and recompleted wells.  Fill out only Sections I. II. and VI for changes of owner,
(Date)	weil 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.