

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator** Mesa Operating Limited Partnership

**Address** P.O. Box 2009, Amarillo, Texas 79189

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	<b>Change in Transporter of:</b>	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

**Other (Please explain)**

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

<b>Lease Name</b> MONSANTO STATE	<b>Well No.</b> 1	<b>Pool Name, including Formation</b> TOWNSEND MORROW	<b>Kind of Lease</b> State, Federal or Fee	<b>Lease No.</b> K 5953
<b>Location</b>				
Unit Letter	K	1980 Feet From The	SOUTH Line and	1980 Feet From The WEST
Line of Section	14	Township	16S	Range 35E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

<b>Name of Authorized Transporter of Oil</b> <input type="checkbox"/> or <b>Condensate</b> <input type="checkbox"/>	<b>Address (Give address to which approved copy of this form is to be sent)</b>
KOCH OIL COMPANY	P.O. BOX 2256 / Wichita, Kansas 67201
<b>Name of Authorized Transporter of Casinghead Gas</b> <input type="checkbox"/> or <b>Dry Gas</b> <input type="checkbox"/>	<b>Address (Give address to which approved copy of this form is to be sent)</b>
TIPPERARY CORPORATION	500 W. Illinois / Midland, Texas 79701
<b>If well produces oil or liquids, give location of tanks.</b>	<b>Is gas actually connected? when</b>
Unit K, Sec. 14, Twp. 16, Rge. 35	YES 1-21-75

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.

(Signature)  
REGULATORY AGENT  
February 14, 1986 (Date)

OIL CONSERVATION DIVISION  
APPROVED FEB 21 1986, 19  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
TITLE

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.

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FEB 17 1986  
O. J. S.  
HOBBS COUNTY