STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

vo. or conce satering DISTRIBUTION SANTA FE FILE U.S.d.e. LAND OFFICE		P. O. BO	TION DIVISIO × 2088 MEXICO 87501		Form C-104 Revised 10-01-78 Format 08-01-83 Page 1
TRANSPORTER OIL OIL OPERATOR OPERATOR OPERATOR	AUTHORIZA	A	R ALLOWABLE ND PORT OIL AND NATU	RAL GAS	
Mesa Operatin	g Limited Part	nership	· · · · · · · · · · · · · · · · · · ·		
P.O. Box 2009	, Amarillo, Te	xas 79189			
Reeson(s) for filing (Check proper New Well Recompletion X Change in Ownership	box) Change in Tr Oil Casinghe	~	y Gas ndensate	t explain)	
M address of previous owner. . DESCRIPTION OF WELL 	Well No. Po	Di Name, Including Fi CASEY STRAWN	ormation	Kind of Lease State, Federal or Fee	Lease No.
Ocertion A Unit Letter ;	660 Feet From T	NORTH	• and660	Feet From The	
Line of Section 34	Township 165		7E , NMPN	LEA	County
I. DESIGNATION OF TRA			GAS Address (Give address	o which approved copy of this	: form is to be sentj
KOCH OIL COMPANY				/ Breckinridge, T	
Name of Authorized Transporter of PHILLIPS PETROLEUM		ar Dry Gas 🛄	311 Phillips E	o which approved copy of this 1dg / Odessa, Tex	·
f well produces oil or liquids, tive location of tanks.	Unit Sec. A 34	Twp. Rge.	Is gas actually connect YES	when 10-7-81	
this production is commingied	i with that from any o	ther lease or pool,	give commingling orde	number:	
IOTE: Complete Parts IV a	nd V on reverse side	if necessary.	1		
				ONSERVATION DIVIS	

· • .

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)

REGILLATORY AGENT February 14, 1986

(Dete)

 8Y
APPROVED

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.



•e