STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LANG OFFICE			
TRAMSPORTER	OIL		
	GAS		
DPERATOR			
PROBATION 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

AUTHORIZATION TO TRANS	OR ALLOWABLE AND SPORT OIL AND NATURAL GAS	
SOUTHLAND ROYALTY COMPANY	Oll 00	
	7499 DIG 18	
	Other (Please explain) Ory Gas Condensate ADD CASINGHEAD GAS	
If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE		
Lease Name West No. Pool Name, Including F	armation Kind of Lease No.	
SOUTH KUTZ 1 Gallegos Gal	1up State, Federal or Fee Federal NM-0560425	
Unit Letter B 970 Feet From The North Life Line of Section 11 Township 26N Range	11W , NMPM, San Juan County	
Mame of Authorized Transporter of Casingneed Gas A or Ory Gas Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, Arizona 85068 Name of Authorized Transporter of Casingneed Gas A or Ory Gas Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company P.O. Box 990, Farmington, NM 87499		
If well produces oil or liquids. Unit Sec. Twp. Age.	is gas actually connected? When	
f 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 COMPILANCE	OIL CONSERVATION DIVISION	
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 ny knowledge and belief.	APPROVED STANK 1985	
	SUPERVISOR DISTRICT # 3	
Sielawe, Sterleye, Secretary (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 allowed.	
4-19-85 (Date)	Fill out only Sections I II III and III for the control of	
	well name or number, or transporter, or other such change of condition.	

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