

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES SUBMITTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	☐ OIL
	☐ GAS
OPERATOR	
PERMITS 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

Southland Royalty Company

Address

P. O. Box 4289, Farmington, NM 87499

Reasons for filing (Check proper box)

☐ New Well

Change in Transporter etc

☐ Recompletion

☐ Oil

☐ Dry Gas

☐ Change in Ownership

☐ Casingshead Gas

☒ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease name Federal	Well No. 1214	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No. NM 28759
Location Unit Letter N	840	Feet From The South	1800	Feet From The West
Line of Section 12	Township 26N	Range 11W	NMPM.	San Juan Co

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casingshead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit : N ; Sec. : 12 ; Twp. : 26N ; Rng. : 11W ; Is gas actually connected? when

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.

OIL CONSERVATION DIVISION

APPROVED

AUG 15 1986

BY

Frank J. [Signature]

TITLE

SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1106.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for a well on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of a well name or number, or transporter, or other such change of conditions.

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

Drilling Clerk

(Title)

9-1-86

(Date)

RECEIVED
AUG 15 1986
OIL CON. DIV.
DIST. 3