STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| (##1## 444 | | |
|------------------|-----|--|
| DISTRIBUTION | | |
| SANTA FE | | |
| FILE | | |
| U.S.O.4. | | |
| LAND OFFICE | | |
| TRANSPORTER | 014 | |
| | GAS | |
| OPERATOR | | |
| PROBATION OFFICE | | |

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Formal 06-01-33

REQUEST FOR ALLOWABLE

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Southland Royalty Company P. O. Drawer 570, Farmington, New Mexico 87499 Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: ADDED CONDENSATE TRANSPORTER Recompletion 011 Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Lagse Name Well No. | Pool Name, including Formation Lease No. State, Federal or Fee Federal **Browning Stewart** #5 Fulcher Kutz Pictured Cliffs SF-071867 Location 1180 South Line and 1030 Feet From The East 28 North Range 11 West San Juan Township Line of Section NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Giant Refining Company P. O. Box 9156, Phoenix, Arizona 85068 Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) Southern Union Gathering P. O. Box 1899, Bloomfield, New Mexico Sec Unit Two. Rae. Is gas actually connected? If well produces oil or liquids, give location of tanks. 10 28N 11W Yes 4-14-78 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. OIL CONSERVATION DIVISION 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) Lead Production Analyst (Title) April 11, 1985

(Date)

SUPERVISOR DISTRICT # 3 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 AULE 111.

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

Fill out only Sections I. H. 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.