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| SANTA FE               |     |   |  |  |
| FILE                   |     |   |  |  |
| U.S.G.S.               |     |   |  |  |
| LAND OFFICE            |     |   |  |  |
| TRANSPORTER            | OIL |   |  |  |
|                        | GAS |   |  |  |
| OPERATOR               |     |   |  |  |
|                        |     | _ |  |  |

|  | SANTA FE   |  | ONSERVATION COMMISS<br>FOR ALLOWABLE   | SION  | Form C-104 Supersedes Old C-104 and Effective 1-1-65 | d C-110      |  |  |  |
|--|--|--|--|---|--|--------------|--|--|--|
|  | AND  |  |  |   |  |              |  |  |  |
|  | LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS   |  |  |   |  |              |  |  |  |
| 1  | TRANSPORTER OIL  |  |  |   |  |              |  |  |  |
|  | GAS  |  |  |   |  |              |  |  |  |
|  | OPERATOR   |  |  |   |  |              |  |  |  |
| ı.   | PRORATION OFFICE   |  |  | ··-···  | <del></del>  |              |  |  |  |
|  | Operator   | Company  |  |   |  | ŀ            |  |  |  |
|  | Southland Royalty  | Company  |  |   |  |              |  |  |  |
|  |  | Farmington, NM 87401   |  |   |  |              |  |  |  |
|  | P.O. Drawer 570,  Reason(s) for filing (Check proper box)  |  | Other (Please e  | rplain)   |  |              |  |  |  |
|  | New Well   | Change in Transporter of:  | Omer (: sees t   | ,   |  |              |  |  |  |
|  | Recompletion   | Cil Dry Ga   | s 🗍  |   |  | ŀ            |  |  |  |
|  | Change in Ownership  | Casinghead Gas Conden  | 751  |   |  | ļ            |  |  |  |
|  |  |  |  |   | <del></del>  |              |  |  |  |
|  | If change of ownership give name   |  |  |   |  |              |  |  |  |
|  | and address of previous owner  |  |  |   |  |              |  |  |  |
| 11.  | DESCRIPTION OF WELL AND I  | LEASE  |  | _,  |  |              |  |  |  |
| •••  | Lease Name Well No. Pool Name, Including Formation Kind of Lea   |  |  |   |  |              |  |  |  |
|  | Aztec  | 7E Basin Dakota  | S  | tate, Federal or Fed  | Federal NM-03  | 3179         |  |  |  |
|  | Location   |  |  |   |  | İ            |  |  |  |
|  | Unit Letter L ; 1540   | Feet From The South Lin  | e and 930  | Feet From The   | West   |              |  |  |  |
|  |  | <del></del>  |  |   |  | ļ            |  |  |  |
|  | Line of Section 14 Tow   | mship 28.N Range 11  | LW , NMPM,   | San Juan  | Cou  | unty         |  |  |  |
|  |  |  |  |   |  |              |  |  |  |
| III.   | DESIGNATION OF TRANSPORT   | TER OF OIL AND NATURAL GA  | S Address (Cine address to   | which approved con  | y of this form is to be sent)                        | 1            |  |  |  |
|  | Name of Authorized Transporter of Oil Permian, Corp.   | or Condensate X  | The state of the s |   |  | ŀ            |  |  |  |
|  | 1  | inghead Gas Or Dry Gas X   | P.O. Box 3119, Midland, TX 79702  Address (Give address to which approved copy of this form is to be sent)   |   |  |              |  |  |  |
|  | Name of Authorized Transporter of Cas  | P.O. Box 1899, Bloomfield, NM 87413  |  |   |  |              |  |  |  |
|  | Southern Union Gathe   | ring Unit Sec. Twp. Ege.   | Is gas actually connected  |   | , NFI 0/413  |              |  |  |  |
|  | If well produces oil or liquids, give location of tanks.   | Out Sec. Two Inde  | No   | 1   |  | , [          |  |  |  |
|  |  | <u> </u>   | <u> </u>   |   |  |              |  |  |  |
| ,,,  |  | h that from any other lease or pool,   | give commingling order r   | umber:  |  |              |  |  |  |
| IV.  | COMPLETION DATA  | Oil Well Gas Well  | New Well Workover  | Deepen Plug   | Back   Same Res'v. Diff. F                           | Res'v.       |  |  |  |
|  | Designate Type of Completio  | on - (X)   | X  |   | ;<br>;<br>;  |              |  |  |  |
|  | Date Spudded   | Date Compl. Ready to Prod.   | Total Depth  | P.B.  | r.D.   |              |  |  |  |
|  | 9-22-80  | 11-16-80   | 6340'  |   | 6295 <b>'</b>  |              |  |  |  |
|  | Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation  | Top Oil/Gas Pay  | Tubii   | ng Depth   | İ            |  |  |  |
|  | 5581' GR   | Dakota   | 6070 <b>'</b>  |   | 6141'  |              |  |  |  |
|  | Perforations   |  |  |   | Depth Casing Shoe                                    |              |  |  |  |
|  | DK: 6070'-6183'  |  |  | 6340 <b>'</b>   | $\dashv$   |              |  |  |  |
|  |  |  | CEMENTING RECORD   |   |  | SACKS CEMENT |  |  |  |
|  | HOLE SIZE CASING & TUBING SIZE   |  | DEPTH SET  |   | 120 sx   |              |  |  |  |
|  | 12-1/4"  | 8-5/8", 24#  | 6340!  |   | 699 sx   |              |  |  |  |
|  | 7-7/8"   | 5-1/2", 15.5#<br>2-3/8", 4.7#  | 6141'  |   | 039_SX   |              |  |  |  |
|  |  | 2-3/8 , 4.7//  | U141   |   |  |              |  |  |  |
|  | The state of the s | OR ALLOWABLE (Test must be a   | feer recovery of total valum   | of load oil and mu  | st he soudt to or exceed top                         | allow-       |  |  |  |
| V.   | OIL WELL   | able for this de   | put of be jor just 24 home,  | · · · · · · · · · · · · · · · · · · ·                               |  |              |  |  |  |
|  | Date First New Oil Run To Tanks  | Date of Test:  | Producing Method (Flow,  | pump, gas lift, ofc   |  |              |  |  |  |
|  |  |  |  |   |  |              |  |  |  |
|  | Length of Test   | Tubing Pressure  | Casing Pressure  |   | MAR 4 1931   |              |  |  |  |
|  |  |  |  |   |  |              |  |  |  |
|  | Actual Prod. During Test   | Oil-Bble.  | Water-Bbis.  | /cor  | MCON. COM.   |              |  |  |  |
|  |  |  |  |   | DIST. 3  |              |  |  |  |
|  |  |  |  |   |  |              |  |  |  |
|  | GAS WELL   |  | Bbls. Condensate/MMCF  | T Gray  | ity of Condensate                                    |              |  |  |  |
|  | Actual Prod. Test-MCF/D  | Length of Test   | BDIS. CORDSTBUTES MINICI   | 5.5.  | .,   |              |  |  |  |
|  | 122 MCF Testing Method (pirot, back pr.)   | Tubing Pressure (Shut-in)  | Casing Pressure (Shut-   | Chok  | e Size   |              |  |  |  |
|  | 1  |  |  |   | 1/2"   |              |  |  |  |
|  | Back Pressure  | 636  | 629  | NISERVATION   | COMMISSION   |              |  |  |  |
| VI.  | CERTIFICATE OF COMPLIAN  | CE   |  | AR 4198   | T COMMISSION   |              |  |  |  |
|  | _  |  |  | HU - 200  | , 19   |              |  |  |  |
| I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. |  | AFFROVES   |  |   |  |              |  |  |  |
|  |  | BY   | ,  |   |  |              |  |  |  |
| , 1  |  |  |  | SOR DISTRICT # 3  |  |              |  |  |  |
|  |  | 11   |  |   |  |              |  |  |  |
|  |  |  | This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened   |   |  |              |  |  |  |
| (Stenature)  |  |  | I 15 Abda form milet   | I was all 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 allow- |  |   |  |              |  |  |  |
|  | District Production M  | All sections of t  | his form must be   | filled out completely for   | allow-   |              |  |  |  |
| (Title)  |  |  | able on new and rec  | Ambiered Meiler   | and 17 for observes of a                             | or           |  |  |  |

3-4-81

able 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.