

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

CO. OR LEASE NUMBER	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Southland Royalty Company
Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)
☐ New Well
☐ Reconpletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinthead Gas
☒ Dry Gas
☒ Condensate
 Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Com	Well No. 1Y	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease () State, Federal or Fee	State	Lease
Location Unit Letter A	1060	North	1060	East	
Line of Section 2	Township 29N	Range 8W	NMPM	San Juan	Co

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil () or Condensate (X) Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casinthead Gas () or Dry Gas (X) El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks. Unit A, Sec. 2, Twp. 29N, Rge. 8W	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 9

This form is to be filed in compliance with RULE 1104.

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

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

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

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

(Signature)
Drilling Clerk

(Date)
9-1-86

(Date)

AUG 15 1986

(Date)