## STATE OF NEW MEXICO **ENERGY AND MINERALS DEPARTMENT** Form C.104 ---Revised 10-01-78 ---OIL CONSERVATION DIVISION Format 06-01-61 SANTA PE Page 1 P. O. BOX 2088 PILE V.3.4.4. SANTA FE, NEW MEXICO 87501 -REQUEST FOR ALLOWABLE OPERATOR AND PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Southland Royalty Company PO Box 4289, Farmington, NM 87499 Roosan(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Reseasieties Oil Dry Ges Change in Ownership Casinghood Gas Condensate If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Legge Nggs Pool Name, including Formation Well No. Kind of Leese Legee No. ooper B Basin Dakota Staté, Federal or Fee SF 077317 Location 1850 Unit Letter\_H Feet From The North 790 East Feet From The 29N 11W Line of Section Township San Juan Range NMPM. County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent) Meridian Oil Inc. PO Box 4289, Farmington, NM 87499 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) unterra Gas Gathering Co. P. O. Box 1899, Bloomfield, NM 87413 Sec. Unit Rge. is gas actually connected? When If well produces oil or liquids. give leggtion of tanks. 'H **'29N** :11W 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.

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SUPERVISION 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 allow able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner, well name or number, or transportes or other such change of condition. Separate Forms C-104 must be flied for each poel in multiply completed wells.