## STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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LAMB OFFICE			<b>]</b>
TRAMOPORTER	<b>ONL</b>	$\perp$	<b>]</b> **
	846		
OPERATOR			3
PROBATION OFFICE			7

Drilling Clerk

May 15, 1987

(Tule)

(Date)

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

Form C-104 Revised 10-01-78 Format 06-01-83

TRAMPORTER CAS	REG	QUEST FOR ALLOWA	BLE	$y_{ij}$
OPERATOR		AND		
PROBATION OFFICE	AUTHORIZATION 1	TO TRANSPORT OIL	AND NATURAL GAS	
I				<u> </u>
Operated		•		
Southland Royalty	y Company			
Address				
PO Box 4289, Fari		499		
Reason(s) for filing (Check proper be	oz <i>)</i>	. 10	ther (Please explain)	
New Well	Change in Transporter	ot:		
Recompletion	OII	Dry Ges		
Change in Ownership	Cesinghead Gas	Condensete		
If change of ownership give name				
	ND IF ICE			
I. DESCRIPTION OF WELL A		Including Formation	Kind of Lease	Legse No
McDaniel C	1E Basin I	*	State Federal or Fe	
Location				
Unit Letter	NO1 NO1 NO1	rth 87( Line and	) Feet From The	West
19	29N	11W	San J	ııan
Line of Section T	ownship 2 211	Range	, NMPM, Dail 0	County
III. DESIGNATION OF TRANS	SPORTER OF OIL AND OF Condensate	NATUKAL GAS	ive address to which approved co	ev of this form is to be sent!
			ox 4289, Farmingt	
Meridian Oil Inc			ive address to which approved co	
Sunterra Gas Gathering			Box 1899, Bloomfiel	
	Unit Sec. Twp.		·	
If well produces all or liquids, give location of lanks.	E 19 29N	11W		ectional properties of
	<u> </u>	i	· · · · · · · · · · · · · · · · · · ·	
If this production is commingled w	with that from any other less	se or pool, give commi	ngling order number	··········
NOTE: Complete Parts IV and	l V on reverse side if nece	ssary.		
VI. CERTIFICATE OF COMPLL	ANCE		OIL CONSERVATION	DIVISION
hereby certify that the rules and regula		ivision have	JUN 2	2 198/
been complied with and that the informa	tion given is true and complete to	the best of	3)	ham!

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

SUPERVISION DISTRICT # 3

If this is a request for allowable for a newly driftled or deepened well, this 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 allowable 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.