STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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9167 9 10 UT 10W			
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V.8.0.A.			
LANG OFFICE			
TRAMPORTER	ON.		
	948		
OPERATOR			
PROBATION OFFICE			

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

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

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

REQUEST FOR ALLOWABLE

	ND PORT OIL AND NATURAL GAS	
I.	FOR TOTE AND NATURAL GAS	
Operator Control Develop Company		
Southland Royalty Company	ار و رود در	
PO Box 4289, Farmington, NM 87499		
Rosson(s) for filing (Cheek proper box)	Other (Please explain)	
New Well Change in Transporter of:		
Rossepistion 🔲 Oil 📉 🖸	ry Ges	
Change in Ownership Castneheed Gas Ca	endens et e	
If change of ownership give name	•	
and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE		
Lette Name Well No. Pool Name, including F		
renier 7 Aztec Pictured	Cliffs Ste(e. Federal or Fee SF 078115	
Location Nonth	000 Wort	
Unit Letter E 1650 Feet From The Lin	e and Feet From The West	
20 Tamaha 31N Bases	11W NMPM San Juan County	
Line of Section 20 Township 3111 Range	TIW NMPM, Ball Stall County	
JIL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	LGAS	
Name of Authorized Transporter of Cil 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 unterra Gas Gathering Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899, Bloomfield, NM 87413	
	is gas actually connected? , When	
If well produces oil or liquids, E 20 31N 11W		
	THE COMMISSION OFFICE NUMBER	
If this production is commingled with that from any other lease or pool,	give comminging order number.	
NOTE: Complete Parts IV and V on reverse side if necessary.		
T. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION		
	APPROVED JUN 2.2.1987 19	
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	APPROVED JUN 22 (987 , 19	
my knowledge and belief.	BY Down	
	TITLE SUPERVISION DISTRICT # 8	
Acco. Contact	This form is to be filed in compliance with RULE 1104.	
Signature)	If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation	
Drilling Clerk	teets taken on the well in accordance with AULE 111.	
(Title)	All sections of this form must be filled out completely for allo- able on new and recompleted wells.	
May 15, 1987	Fill out only Sections I. II. III, and VI for changes of owne	
(Date)	well name or number, or transporter or other such change of condition	