

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF LEASES COVERED	
DISTRICT	
COUNTY	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-79
Formal 05-01-80
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Southland Royalty Company

Address
PO Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	☒ Dry Gas
☐ Recompletion	☐ Oil	
☐ Change in Ownership	☐ Casinthead Gas	
		☐ Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

East 14 West
Lease Name
14 Aztec Pictured Cliffs

Kind of Lease
State, Federal or Fee **SF 077652**

Location
Unit Letter **C** 950 Feet From The North Line and 1480 Feet From The West
Line of Section **25** Township **31N** Range **12W** N.M.P.M. **San Juan** Corner

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinthead Gas or Dry Gas Terra Gas Gathering Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899, Bloomfield, NM 87413
If well produces oil or liquids, give location of lease. Unit C Sec. 25 Twp. 31N Rge. 12W	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.

Peggy Dosh
(Signature)
Drilling Clerk

May 15, 1987

(Title)

(Date)

OIL CONSERVATION DIVISION
JUN 22 1987

APPROVED
BY *Burt J. Shaw*
TITLE **SUPERVISION DISTRICT # 3**

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

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 1104.

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

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

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

JUN 22 1987
OIL CON. DIV.
DIST. 2