

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

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AUG 14 1985

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Southland Royalty Company	
Address P. O. Drawer 570, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
ADDED CONDENSATE TRANSPORTER	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Reese Mesa	Well No. #10	Pool Name, including Formation Albino Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. NM-6889
Location Unit Letter J : 875 Feet From The North Line and 1790 Feet From The East Line of Section 10 Township 32 North Range 8 West , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

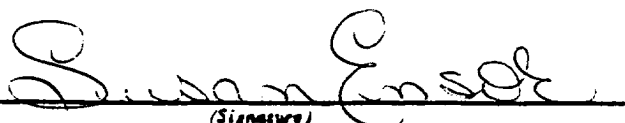
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 9156, Phoenix, Arizona 85068					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 90, Farmington, New Mexico 87499					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 10	Twp. 32N	Rge. 08W	Is gas actually connected? Yes	When 7-10-85

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.


(Signature)

Lead Production Analyst

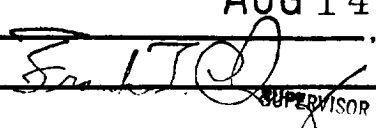
(Title)

August 14, 1985

(Date)

OIL CONSERVATION DIVISION

AUG 14 1985

APPROVED _____, 19____
BY 
TITLE _____ SUPERVISOR 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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1111.

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.