

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                       |                              |
|-----------------------|------------------------------|
| NO. OF TOWNS RECEIVED |                              |
| DISTRIBUTION          |                              |
| SANTA FE              |                              |
| FILE                  |                              |
| U.S.G.A.              |                              |
| LAND OFFICE           |                              |
| TRANSPORTER           | <input type="checkbox"/> OIL |
| OPERATOR              | <input type="checkbox"/> GAS |
| PRODUCTION OFFICE     |                              |

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. Operator**  
Southland Royalty Company

**Address**  
P. O. Box 4289, Farmington, NM 87499

**Reason(s) for filing (Check proper box)**

|  |   |  |
|--|---|--|
| <input type="checkbox"/> New Well            | <input type="checkbox"/> Change in Transporter oil: | <input type="checkbox"/> Dry Gas               |
| <input type="checkbox"/> Recompletion        | <input type="checkbox"/> Oil                        | <input checked="" type="checkbox"/> Condensate |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas             |  |

**Other (Please explain)**

If change of ownership give name and address of previous owner

**II. DESCRIPTION OF WELL AND LEASE**

|                                |                 |   |  |
|--------------------------------|-----------------|---|--|
| Lease Name<br>Culpepper Martin | Well No.<br>3A  | Pool Name, including Formation<br>Blanco Mesa Verde | Kind of Lease<br>State, Federal or (Fee) Fee |
| Location                       |                 |   |  |
| Unit Letter<br>D               | 790             | Feet From The<br>North                              | Line and<br>920                              |
| Line of Section<br>33          | Township<br>32N | Range<br>12W  | NMPM, San Juan                               |

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| Meridian Oil Inc.  | P. O. Box 1599, Aztec, NM 87410  |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Southern Union Gathering Co.   | P. O. Box 1899, Bloomfield, NM 87413                                     |
| If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge. Is gas actually connected? when                      |
| D 33 32N 12W   |  |

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.

*Reggie Orak*  
(Signature)  
Drilling  
(Title)  
9-1-86  
(Date)

**RECEIVED**  
AUG 15 1986  
OIL CON. DIV.

OIL CONSERVATION DIVISION

APPROVED *Frank J. Davis* **AUG 5 1986**

BY *Frank J. Davis*

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 deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.

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

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

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

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |     |
|------------------------|-----|
| NO. OF COPIES RECEIVED |     |
| DISTRIBUTION           |     |
| SANTA FE               |     |
| FILE                   |     |
| U.S.S.O.               |     |
| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PERMITS OFFICE         |     |

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

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)

|  |   |   |
|--|---|---|
| <input type="checkbox"/> New Well            | Change in Transporter of:               | <input checked="" type="checkbox"/> Dry Gas |
| <input type="checkbox"/> Recompletion        | <input type="checkbox"/> Oil            | <input type="checkbox"/> Condensate         |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas |   |

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|   |                |   |  |                  |
|---|----------------|---|--|------------------|
| Lease Name<br>Culpepper Martin  | Well No.<br>3A | Pool Name, including Formation<br>Blanco Mesa Verde | Kind of Lease<br>State, Federal (or Fee) | Lease No.<br>Fee |
| Location<br>Unit Letter <u>D</u> <u>790</u> Feet From The <u>North</u> Line and <u>920</u> Feet From The <u>West</u><br>Line of Section <u>33</u> Township <u>32N</u> Range <u>12W</u> NMPM, <u>San Juan</u> 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"/><br>Meridian Oil Inc.       | Address (Give address to which approved copy of this form is to be sent)<br>PO Box 4289, Farmington, NM 87499    |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/><br>Sunterra Gas Gathering Co. | Address (Give address to which approved copy of this form is to be sent)<br>P. O. Box 1899, Bloomfield, NM 87413 |
| If well produces oil or liquids,<br>give location of tanks.   | Unit <u>D</u> Sec. <u>33</u> Twp. <u>32N</u> Rge. <u>12W</u><br>Is gas actually connected? <u>when</u>           |

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]  
(Signature)  
Drilling Clerk  
(Title)  
May 15, 1987  
(Date)

OIL CONSERVATION DIVISION

JUN 22 1987

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY [Signature]

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 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 multiple completed wells.

RECEIVED  
JUN 22 1987  
OIL CON. DIV.  
DIST. 3