STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Tule)

(Date)

May 15, 1987

89. 40 40040 MEETINGS			
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SARTA FE			
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U.S.B.S.			
LAMO OFFICE			
TRAMPPROTER	91		
	946	Ī	
OPERATOR.			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2084 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-75 Format 06-01-63

REQUEST FOR ALLOWABLE

•	i.			
	Southland Royalty Company OIL CON. DIV.			
PO Box 4289, Farmington, NM 87499 Ressen(s) for filing (Check proper box)		DIST. 3		
		Other (Please explain)		
	New Well Change in Transporter of:			
		y Ges		
		andensete		
	If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE				
Н	Lesse Name Well No. Pool Name, including For inbard Blanco Pictured	Cliffs State, Federal or Fee Lease No.		
	L 1450 South Unit Letter Feet From The Line	1110 West		
	22 32N Line of Section Township Range	12W Sam Juan County		
s	Meridian Oil Inc. Name of Authorized Transporter of Oil or Condensate Meridian Oil Inc. Name of Authorized Transporter of Casinghedd Gas or Dry Gas interna Gas Gathering Co. If well produces oil or liquids, Unit Sec Twp Rage. give location of tanks.	PO Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899, Bloomfield, NM 87413 [18 gas actually connected? When		
If this production is commingled with that from any other lesse or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary.				
				VI. CERTIFICATE OF COMPILANCE I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED APPROVED APPROVED
been complied with and that the information given is true and complete to the best of my knowledge and belief.		BY		
		TITLE SUPERVISION DISTRICT # 3		
	Signature)	This form is to be filed in compliance with RULE 1104. 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	tests taken on the well in accordance with AULE 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 owne well name or number, or transporter or other such change of condition Separate Forms C-104 must be filed for each pool in multip.