

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	Pool name change
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<u>R. 2. 29</u>
	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Chamberlain</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Undesignated Fruitland Sand</u>	Kind of Lease State, Federal or Fee <u>Fee</u>
Location			
Unit Letter <u>A</u>	<u>790</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>East</u>		
Line of Section <u>14</u>	Township <u>32N</u>	Range <u>12W</u>	<u>NMPM</u> , <u>San Juan</u> Co.

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)
<u>Meridian Oil Inc.</u>	<u>PO Box 4289, Farmington, NM 87499</u>
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)
<u>Sunterra Gas Gathering Company</u>	<u>PO Box 1899, Bloomfield, NM 87413</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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.

  
Regulatory Affairs

April 5, 1989

(Title)

(Date)

OIL CONSERVATION DIVISION

APR 14 1989

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

BY Burt D. [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 deer 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 oil 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.

MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-102  
Supersedes O-101  
Effective 1-1-89

All distances must be from the outer boundaries of the Section.

Owner <b>Southland Royalty Company</b>		Lease <b>Chamberlain</b>		Well No. <b>2</b>
Tract Letter <b>A</b>	Section <b>14</b>	Township <b>32N</b>	Range <b>12W</b>	County <b>San Juan</b>
Well Location (Location of Well)				
<b>790</b>	feet from the <b>North</b>	<b>790</b>	feet from the <b>East</b>	
Ground Surface Elev. <b>6300'</b>	Producing Formation <b>Fruitland Sand</b>	Pool <b>Undesignated</b>	Dedicated Acreage: <b>160</b>	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

		790'
		790'
Sec.		14

CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name  
**Peggy Bradfield**  
Position  
**Regulatory Affairs**  
Company  
**Southland Royalty Co**  
Date  
**April 5, 1989**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed \_\_\_\_\_

Registered Professional Engineer and/or Land Surveyor

Certificate No. \_\_\_\_\_