

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-104  
Revised 10-01-78  
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U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. Operator**  
Southland Royalty Company  
Address  
P. O. Box 4289, Farmington, NM 87499

Reasons for listing (Check proper box)  
 New Well  
 Recompletion  
 Change in Ownership  
 Change in Transporter of:  
 Oil  
 casinghead Gas  
 Dry Gas  
 Condensate  
 Other (Please explain)

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

**II. DESCRIPTION OF WELL AND LEASE**

Lease name Jicarilla 101	Well No. 7	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State (Federal) or Fee	Lease Jic.Cont 101
Location Unit Letter <u>P</u> ; <u>1050</u> Feet From The <u>South</u> Line and <u>1180</u> Feet From The <u>East</u> Line of Section <u>12</u> Township <u>26N</u> Range <u>4W</u> NMPM. <u>Rio Arriba</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"/> Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	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 tanks. Unit <u>P</u> Sec. <u>12</u> Twp. <u>26N</u> Rge. <u>4W</u>	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.

*Reggie Dock*  
\_\_\_\_\_  
(Signature)  
Drilling Clerk  
\_\_\_\_\_  
(Title)  
9-1-86  
\_\_\_\_\_  
(Date)

**RECEIVED**  
AUG 15 1986  
OIL CON. DIV.  
DIST. 3

OIL CONSERVATION DIVISION  
APPROVED AUG 15 1986  
BY *Frank J. [Signature]*  
TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1186.  
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devt. tests taken on the well in accordance with RULE 111.  
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 well name or number, or transporter, or other such change of conditions.  
Separate Forms C-104 must be filed for each pool in mult. completed wells.