

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

NO. OF LEASES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.S.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL
	<input type="checkbox"/> GAS
OPERATOR	
PERMITS 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
PO Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box) Other (Please explain)

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

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nye	Well No. 1A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. SF 078198
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Location

Unit Letter 0 820 Feet From The South Line and 1550 Feet From The East

Line of Section 12 Township 30N Range 11W NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

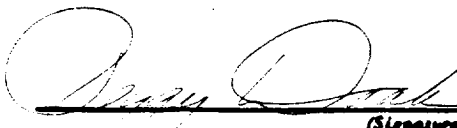
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Sunterra Gas Gathering Co.	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>0</u> Sec: <u>12</u> Twp: <u>30N</u> Rge: <u>11W</u>	Is gas actually connected? _____ When _____

If this production is commingled with that from any other lease or pool, give commingling order number: _____

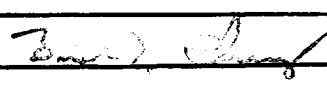
NOTE: Complete Parts IV and V on reverse side if necessary.

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.



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

OIL CONSERVATION DIVISION
JUN 22 1987
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 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