STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LANG OFFICE			
TRAMPPORTER	Off.		
	848		
OPERATOR			
PROBATION DES	42.5		

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 STATE OF THE STA	AUTHO	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
Operator	_								
Southland Royalty	Company	7	· · · · · ·						
PO Box 4289, Farm	inaton	NM 97	499						
Recsen(s) for filing (Check proper box		NPI 07	433	17	Other (Pleas	0.000/000			
New Well		in Transporter	r of:	`	,er (1 1ess	e elpinia,			
Recompletion	on		\mathbf{x}	Dry Ges					
Change in Ownership	c	inghead Gas		Condensate	•				
If change of ownership give name						,			
and address of previous owner									
II. DESCRIPTION OF WELL AN									
Letae Name Last	Well No. Pool Name, including 6 Basin Dakota		_	Formation		Kind of Lease Lease No. State, Federal or Fee SF 077652			
Location		Dasin D	akuta			Steria, Fodorat or Foo SF (177652		
Unit Letter D 790	Feet Fro	Nor	th	790)	West			
				ne and		Feet From The			
Line of Section 23 Tou	mahip 31	.N	Range	12W	, NMPM	San Juan	County		
Name of Authorized Transporter of Casinghead Gas or Dry Gas unterra Gas Gathering Co. If well produces oil or liquids, 'Unit Sec. Twp. Rgs. If well produces oil or liquids, 'D '23 '31N 12W			P. O. Box 1899, Bloomfield, NM 87413						
give location of idnks.	, , , , ,			-l	 .	·			
If this production is commingled wit		-	-	Eive commin	igling order	number:			
NOTE: Complete Parts IV and I	on reverse s	ide if neces	sary.						
VI. CERTIFICATE OF COMPLIA	NCE				OIL C	ONSERVATION DIVISION	ı		
			,			JUN 22 1927	•		
I hereby certify that the rules and regulation been complied with and that the information				APPROV	/ED				
my knowledge and belief.	•	•		BY		Such Thank			
	•			TITLE		SUPERVISION DISTRIC	T # 3		
	_	•		· · · · · · · · · · · · · · · · · · ·					
Marine Joak	<i>,</i> 			11		be filed in compliance with s			
Drilling Clerk	wel			well, this	form must	est for allowable for a newly- be accompanied by a tabulati	ion of the deviation		
				{		vell in accordence with AULI this form must be filled out co			
May 15, 1987	1/		•			ompleted wells.	imbrarary lot attom		
(Det	,,			Fill well name	out only S	ections I, II, III, and VI for or transporter, or other such c	changes of owner		
*4	-			Separ	ate Forms	C-104 must be filed for each	=		
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