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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator		SOUTHLAND ROYALTY COMPANY	
Address			
P. O. Drawer 570, Farmington, New Mexico 87401			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>
		NAME CHANGE	

If change give name Aztec Oil & Gas Company, P. O. Drawer 570, Farmington, New Mexico 87401
and address of previous owner

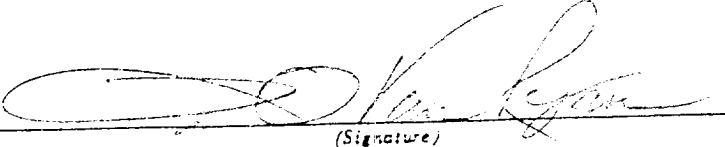
Lease Name		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Reese Mesa		#2	Blanco Mesaverde	State, Federal or Fee Federal	NM-9037
Location					
Unit Letter	L	2540	Feet From The South	Line and 350	Feet From The West
Line of Section	12	Township	32 North	Range	8 West
				NMPM,	San Juan County

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)		
Plateau, Inc.			P. O. Box 108, Farmington, New Mexico 87401		
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)		
Northwest Pipeline Corporation			P. O. Box 90, Farmington, New Mexico 87401		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected? When

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

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Name of Producing Formation		Top Oil/Gas Test		Testing Depth					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of produced oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)			
Date Started - Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MWCF	Gravity of Condensate
Testing method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED JAN 1 1978, 19	
 (Signature)		Original Signed by A. R. Kendrick	
District Production Manager		BY	
(Title)		TITLE SUPERVISOR DIST. #3	
1-1-78			
(Date)			
		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 multiply completed wells.	