

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

RECEIVED
APR 14 1989
OIL CON. DIV.
INST. 3

I. Operator Southland Royalty Company

Address PO Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box):
☐ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain): Pool name change
1-8769

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Burnt Mesa</u>	Well No. <u>2A</u>	Pool Name, including Formation <u>Los Pinos S Fruitland PC Sand</u>	Kind of Lease <u>State, Federal or Fee</u>	Lease <u>NM 2995</u>
Location Unit Letter <u>0</u> ; <u>1090</u> Feet From The <u>South</u> Line and <u>1560</u> Feet From The <u>East</u> Line of Section <u>26</u> Township <u>32N</u> Range <u>7W</u> , NMPM, <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"/> <u>Meridian Oil Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <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"/> <u>Northwest Pipeline Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>PO Box 90, Farmington, NM 87499</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? <u>When</u>

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.

[Signature]
Regulatory Affairs
(Title)
March 1, 1989
(Date)

OIL CONSERVATION DIVISION
APR 14 1989

APPROVED _____, 19____
BY [Signature]
TITLE SUPERVISION DISTRICT # 8

This form is to be filed in compliance with RULE 1104.
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 a able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of ov well name or number, or transporter, or other such change of condi
Separate Forms C-104 must be filed for each pool in mul completed wells.