

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

				_
		ī		
DISTRIBUTI	0 M		i	_
SAMTA PE		1	1	_
FILE		!	i	_
U.S.G.S.		1	1	_
LAND OFFICE		1		_
TRANSPORTER	OIL	1	i	-
	BAD	1	i	7
OPERATOR		ī	1	٦
PROBATION OF		-	+	4

## OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

SANTA FE, NEW MEXICO 87501

## REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Operator  County Lond Develor Company		
Southland Royalty Company		
PO Box 4289, Farmington,	NM 87499	
Hersonis) for tiling (Check proper box)	Other (Please exprain)	
New Well Change in Transporter of:	Pool name change	
	ry Gas	
Change in Ownership Casinghead Gas C	ondensate ( X') 69	
If change of awnership give name		
and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE Lease Name   Well No.   Pool Name, including F		
Grenier Weil No. 1 Pool Name, including F		
Location		
Unit Laties N : 1075 Feet From The South Lin	ne and 1850 Feet From The West	
	to die	
Line of Section 13 Township 31N Range	12W , NMPM, San Juan c	
Name of Authorized Transporter of Cit or Condensate Ameridian Oil Inc.  Name of Authorized Transporter of Casingness Gas or Bry Gas American Gas Gathering Company  If well produces off or figures.  Unit Jee. Twp. Rige.  give location of fance.	PO Box 4289; Farmington, NM 87499 Address Give address to which approved copy of this form is to be ser PO Box 1899, Bloomfield, NM 87413  Is gas actually connected?  Address Give address to which approved copy of this form is to be ser PO Box 1899, Bloomfield, NM 87413	
If this production is commingled with that from any other lesse 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	that the rules and regulations of the Oil Conservation Division have	
my knowledge and belief.	BY Such ) Chang	
	TITLE SUPERVISION DISTRICT #8	
Manuald	This form is to be filed in compliance with RULE 1104.	
Regulatory Affairs	If this is a request for allowable for a newly drilled or de well, this form must be accompanied by a tabulation of the de tests taken on the well in accordance with RULE 111.	
(Tule) March 1, 1989	All sections of this form must be filled out completely for able on new and recompleted wells.	
(Date)	Fill out only Sections I. II. III. and VI for changes of well name or number, or transporter, or other such change of con Separate Forms C-104 must be filed for each pool in m	
'1	Completed wells.	