BTATE OF NEW MEXICO ENERGY AND MINIFIALS DEPARTMENT CEIVEDIL CONSERVA P. O. DO SANTA FE, NEW U.S. 12'88	X 2088
C. C. D. REQUEST FOR ANTERNA DE STORIZATION TO TRANSF 3. Committee Committee	
Southland Royalty Company V Address 21 Desta Drive, Midland, Texas 79705 Ressen(s) for filing (Check proper box) New Well Recompletion Change in Transporter of: Recompletion Oil E Dry Can Change in Ownership Casinghead Cas Conden If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE   Lease Name Nell No. Pool Name, including Fa   Palmillo State Com 1 Turkey Track Mo   Location 1 Turkey Track Mo   Location 1 Feet From The North_Line   Line of Section 32 To making 185	e end Feet From The East
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Norw of Authorized Transporter of Cil or Condensate Enron Oil Trading & Transportation Company Name of Authorized Transporter of Casinghead Gas or Dry Gas El Paso Natural Gas If well produces ell er liguida, eive location of tents F 32 185 29E	S Address (Give address to which approved copy of this form is to be sent) P. O. Box 10607, Midland, Texas 79702 Address (Give address to which approved copy of this form is to be sent; P. O. Box 1492, El Paso, Texas 79988 Is gas actually connected? Yes Unknown
1. CERTIFICATE OF COMPLIANCE 1 hereby certify that the rules and regulations of the Oil Conservation Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief. Barbara Catta Maland (Signeture) Production Assistant. (Date)	OIL CONSERVATION DIVISION APPROVED <u>DEC 1 9 1988</u> , 19 BY <u>Original Signed By</u> Mike Williams TITLE This form is to be tiled in compliance with RULE 1133. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devi 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 our well name or number, or transporter, or other such change of cond Separate Forms C-104 must be filled for each puol in mu completed wells. Fast ID-3

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