

OPERATOR	
SALES	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	
PRODUCTION OFFICE	

DEC 12 '88

SANTA FE, NEW MEXICO 87501

NOV 10 '88

O.C.D. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ARTESIA, OFFICE

O.C.D. ARTESIA, OFFICE

Operator: Southland Royalty Company
Address: 21 Desta Drive, Midland, Texas 79705
Reason(s) for filing (Check proper box):
New Well ☐ Change in Transporter of: Oil ☒ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☒ Condensate ☐
Change in Ownership ☐
Other (Please explain): Di 31174
If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Palmillo State Com Well No.: 1 Pool Name, including Formation: Turkey Track Morrow, N. Kind of Lease: State, XXXXXXXX L6518
Location: Unit Letter: FG : 1731 Feet From The North Line and 2310 Feet From The East
Line of Section: 32 Township: 18S Range: 29E NMPM, Eddy

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Casinghead Gas ☒ Enron Oil Trading & Transportation Co. P. O. Box 10607, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas P. O. Box 1492, El Paso, Texas 79988
If well produces oil or liquids, give location of tanks: Unit: F Sec.: 32 Twp.: 18S Rge.: 29E
Is gas actually connected? Yes Unknown

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 above is true and complete to the best of my knowledge and belief.
Barbara Caster Holand
(Signature)
Production Assistant
11-8-88
(Date)

OIL CONSERVATION DIVISION
APPROVED DEC 19 1988
BY Original Signed By Mike Williams
TITLE
This form is to be filed in compliance with RULE 111.
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 well on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of cond
Separate Forms C-104 must be filed for each pool in mu recompleted wells.

Code _____ Prior _____ Contract No. _____ Destination Name _____
Mileage _____ Rate _____ Method of Meas _____ Trans _____
Code _____ Prior _____ Contract No. _____ Destination Name _____
Mileage _____ Rate _____ Method of Meas _____ Trans _____
Sales Dept. Amy Wight 90 Date 8/14/88
Land Dept. _____ Date _____

TO BE COMPLETED BY SALES DEPARTMENT
TO BE COMPLETED BY LAND DEPARTMENT

