					1		
1	NO. OF COPIES RECEIVED	<b>]</b>					
1	DISTRIBUTION 7	7					
	SANTA FE /		CONSERVATION COMMISS	ION	Form C-104		
		1 REQUEST	FOR ALLOWABLE		Supersedes Old C-104 and C-1 Elfoctive 1-1-65		
	FILE /	7	AND				
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NAT	TURAL GAS			
	LAND OFFICE	4					
-	TRANSPORTER OIL	_					
	GAS (	_					
	OPERATOR 4						
1.	PRORATION OFFICE						
_	Operator	Operator Control Contr					
	SOUTHLAND ROYALTY COUPANY						
	Address						
	P. O. Drawer 570, Farmington, New Mexico 87401						
	Reason(s) for filing (Check proper box		Other (Please exp	olain)			
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry G	Sas T				
	Change in Ownership	Casinghead Gas Conde	ensate	NAME CHANG	iE .		
	Change in Ownersmy						
	If change give name and address of previous owner	Aztec Oil & Gas Company	, P. O. Drawer 570	, Farmington	1, New Mexico 87401		
iI.	DESCRIPTION OF WELL AND	LEASE					
•••	Lease Name	Well No.; Pool Name, Including !		nd of Lease	Jicarilla Lesse No.		
	Arizona Jicarilla						
	Location						
		650 Feet From The South Li	. 1650 -		East		
	Unit Letter;1	Feet From The	ine andF	eet from The			
	Line of Section 26 To	wishin 25 North Range	4 West . NMPM.		Rio Arriba County		
	Line of Section 20 To	wiship Z5 NOTTN Range	4 West , NMPM,	····	RIO ATTIDA County		
			• •				
iI.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G.	AS	hich approved conv	of this form is to be sent!		
	Name of Authorized Transporter of Oil [ or Condensate  Adaress (Give address to which approved copy of this form is to be sent)						
	1.0		Salaran (Circa address to m	high approved conv			
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be						
	Gas Company of New	First Internation	First International Bldg., Dallas, Texas 75270				
i	If well produces oil or liquids, Unit Sec. Twp. Fige. Is gas actually connected? When						
	give location of tanks.						
	If this production is commingled wi	th that from any other lease or pool,	, give commingling order nu	mber:			
	COMPLETION DATA						
	m	Cii Weli Gas Well	New Well Workover I	Deepen Plug E	Back   Same Res'v. Diff. Res'v.		
	Designate Type of Completion	$\mathbf{n} - (\mathbf{A})$		ļ	!		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T	.D.		
i							
	Elevations (DF, RKE, RT, GR, etc.,	Name of Fraducing Formation	Top Oil/Gas Pay	Tubino	Depth		
	Perforations			Depth	Casing Shoe		
	Periorations			•	• • • • • • • • • • • • • • • • • • • •		
	TUBING, CASING, AND CEMENTING RECORD						
1	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
		!					
į		<u> </u>	1				
			1				
		<u> </u>	_1	<u> </u>			
۲.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-						
•	OIL WELL	able for this d	epth or be for full 24 hours)				
į	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	mp, gas lift, etc.)			
					***************************************		
ł	' ength of Test	Tubing Pressure	Casing Pressure	Cid.	SI Z		

٧. 011-Bb.s. Water - Bbls. Actual Prod. During Test

GAS WELL		\ air c	COM COM.		
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Chexe Size		
L			1		

## I. CERTIFICATE OF COMPLIANCE

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.

> (Signatise) District Production Manager

(Title)

OIL CONSERVATION COMMISSION

JAN 1 2 19/8 Original Signed by A. R. Kendrick 19 APPROVED. - 7

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despened 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.

1-1-78 (Date)