

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.L.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PROBATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Southland Royalty Company
Address
P.O. Drawer 570, Farmington, New Mexico 87499
Reason(s) for filing (Check proper box)
☐ New Well
☐ Recombination
☐ Change in Ownership
Change in Transporter of:
☒ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
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OIL CON. DIV.
DIST. 3**

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hawk Federal	Well No. 2	Pool Name, including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee FEE	Lease No. ---
Location Unit Letter C 910 Feet From The North Line and 1840 Feet From The West Line of Section 35 Township 25N Range 2W NMPM. Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, Arizona 85068	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks. C 35 25N 2W	Unit C	Sec. 35
	Twp. 25N	Rge. 2W
	Is gas actually connected? No	

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.

Ether J. Gray
(Signature)

Secretary

(Title)

April 1, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED **APR 02 1985**
BY *[Signature]*
TITLE **SUPERVISOR DISTRICT # 3**

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

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.