STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

12-10-85

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OIL CONSERVATION DIVISION P. Q. BQX 2088

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

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SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND



I.	AUTHOR	RIZATION TO TRANS	SPORT OIL	L AND NATU	DEC 11 1985	\$.c.3669
Southland Royalty Company					OIL CON. DI	٧.
P.O. Drawer 570, Farmington	on, Ne	w Mexico 8749	39		DI\$7. 3	
Recon(s) for filing (Check proper box) Now Well Recompletion Change in Ownership	Oii		Dry Gas Candensate	Other (Please NAME CH	e explain) ANGE from JICARILLA 10	1 #3E -
If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LE	A STP		··· · · · · · · · · · · · · · · · · ·			
Lasse Name		Pool Name, Including I	Formation		Kind of Lease	Legse No.
Jicarilla 101	3M	Blanco Mesav	erde		State, Federal or Fee Federal	Jic Cont 1
Unit Letter E : 1650 Line of Section 1 Township	-	m The North Li	ne and	915 , nmpm	F***From TheWest . Rio Arriba	County
M. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Ott Giant Refining Company Name of Authorized Transporter of Casingnet Gas Company of New Mexico Unit	or C	ar Dry Gas 🛣	P. O.	Box 9156	b which approved copy of this form to prove the provention of this form to which approved copy of this form to prove the provention of the	5068
dive location of tanks.	1	26N 4W	No		1	ļ
If this production is commingled with the NOTE: Complete Parts IV and V on the NOTE:			give comm	ningling order	number:	
VI. CERTIFICATE OF COMPILANCE I hereby certify that the rules and regulations of the been complied with and that the information gives	the Oil Co	nservation Division have	APPRO		DEC	11 1985
my knowledge and belief.		a complete to the seat of	8Y		Snow Swa	
Secretary (Title)	Luz	lever)	if twell, th	this is a requisis form must liken on the w	be filed in compliance with Rut est for allowable for a newly dri be accompanied by a tabulation rell in accordance with RULE 1 this form must be filled out comp	lied or deepened of the deviation

able on new and recompleted wells.

completed 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

STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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

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

REQUEST FOR ALLOWARIE

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

OPERATOR		AND	
PROBATION OFFICE	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS DEC 11	1985
permer	,		
SOUTHLAND ROYALTY COM	PANY	والمرابع المرابع	DIV.
ddress		DIST. :	3
P.O. Drawer 570, Farm	ington, New Mexico 87	499	
Reason(s) for filing (Check proper box)	-	NAME CHANGE from JICARILLA 10	11 // 05
Recompletion	Change in Transporter of:	<u> </u>)1 #3E
Change in Ownership		Dry Gas Candensate	;
change of ownership give name nd address of previous owner			O.E
. DESCRIPTION OF WELL AND	LEASE	- .	
Ji carilla 101	Well No. Pool Name, Including		Legse No.
Jicarilla 101	3M Basin Dakota-	B.S. Mesa Gallup state, Federal or Fee Federal	Jic Cont :
	Nonth '	015	
Unit Letter E : 100U	Feet From The NOTUII	ine and 915 Feet From The West	······································
Line of Section 1 Towns	ship 26N Range	4W NMPW, Rio Arriba	County
I. DESIGNATION OF TRANSPORTED AND ALL COMPANY AND ALL COMPANY AND ALL COMPANY OF NEW MEXTURE PRODUCES OF TRANSPORTED AND ALL COMPANY OF NEW MEXTURE PRODUCES OF TRANSPORTED AND ALL COMPANY OF TRANSPORTED AND ALL COMPAN	queda Gas or Dry Gas A	P.O. Box 9156, Phoenix, Arizona 850 Address (Give address to which approved copy of this form is P.O. Box 1899, Bloomfield, NM 8741 Is gas actually connected? when	68 (a be sent)
		Yes	22-81
OTE: Complete Parts IV and V	on reverse side if necessary.	11	
I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	O4 400F
nereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED	$\Omega_{1} 1985$
en complied with and that the information in the in	given is true and complete to the best of	コー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	
		SUPERVISOR DISTRICT # 3	<u> </u>
	(.	TITLE SUPERVISOR DE	TRICT SE
Cuft	2	This form is to be filed in compliance with RUL	
/Signatur Secreta		If this is a request for allowable for a newly drill well, this form must be accompanied by a tabulation tests taken on the well in accordance with AULE 11	at the dame.
(Title) 12-10-		All sections of this form must be filled out compi able on new and recompleted wells.	etely for silows
(Date)		Fill out only Sections I. II. III. and VI for the well name or number, or transporter, or other such than	nges of owner,