

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUIRED	
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SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 8750

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

RECEIVED

MAY 27 1986

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL CON. DIV./
DIST. 3

I.

Operator
Southland Royalty Company

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	☐ Oil	☐ Dry Gas
☐ Recompletion	☐ Casinhead Gas	☒ Condensate	
☐ Change in Ownership			

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hanks	Well No. 1	Pool Name, including Formation Fulcher Kutz Pictured Cliffs	Kind of Lease State (Federal) or Fee	Lease No. SF 077874
Location				
Unit Letter D	990	Feet From The North	Line and 900	Feet From The West
Line of Section 12	Township 27N	Range 10W	NMPM, San Juan	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casinhead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Co.	P. O. Box 1899, Bloomfield, NM 87413
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when
	D 12 27N 10W

If this production is commingled with that from any other lease or pool, give commingling order number:

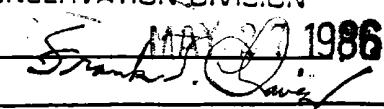
NOTE: Complete Parts IV and V on reverse side if necessary.

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.


(Signature)
Drilling Clerk
(Title)
6-1-86
(Date)

OIL CONSERVATION DIVISION

APPROVED  MAY 27 1986
BY
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 110a.
If this is a request for allowable for a newly drilled or des well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of c well name or number, or transporter, or other such change of con: Separate Forms C-104 must be filled for each pool in m completed wells.

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to
OIL WELL safe for this depth or be for well 24 hours)

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/10MCF	Gravity of Condensate
Tooling Method (puck, back pr.)	Tubing Pressure (5000-15)	Casing Pressure (5000-15)	Choke Size