

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| OPERATOR | |
| PRODUCTION 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 ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☐ Change in Ownership ☐ Casinghead Gas ☒ Condensate
Other (Please explain) Effective 8/1/85

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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|-----------------------|---|---|-------------------------------|
| Lease Name <u>Hanks</u> | Well No. <u>17</u> | Pool Name, including Formation <u>Basin Dakota</u> | Kind of Lease <u>State, Federal or Fee Federal</u> | Lease No. <u>SF-077874</u> |
| Location Unit Letter <u>N</u> : <u>940</u> Feet From The <u>South</u> Line and <u>1755</u> Feet From The <u>West</u> Line of Section <u>5</u> Township <u>27N</u> Range <u>9W</u> , NMPM, <u>San Juan</u> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|---|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Mancos Corporation</u> | Address (Give address to which approved copy of this form is to be sent) <u>P. O. Drawer 1320, Farmington, NM 87499</u> |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Southern Union Gathering</u> | Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1899, Bloomfield, NM 87413</u> |
| If well produces oil or liquids, give location of tanks. Unit <u>N</u> Sec. <u>5</u> Twp. <u>27N</u> Rge. <u>9W</u> | Is gas actually connected? <u>Yes</u> When _____ |

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.

Lizlie Kahway
(Signature)
Production Analyst
(Title)
7-10-85
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 12 1985
BY Frank J. [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 1111.

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, transporter, or other such change of condition.

Separate Forms must be filled for each pool in multiply completed wells.

RECEIVED
JUL 12 1985
OIL CON. DIV.
SANTA FE

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