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1	Southland R					оуа	1 t
Ads	Address						
ļ	P. O. Drawer					70,	Fa

	DISTRIBUTION SANTA FE FILE	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65					
	U.S.G.S. LAND OFFICE OIL /	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL GA	AS .					
	IRANSPORTER GAS /								
1.	PRORATION OFFICE								
		Southland Royalty Company							
-	P. O. Drawer 570, Far								
	Reason(s) for filing (Check proper box) New Well								
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condensate Name change							
	If change give name and address of previous owner	Aztec Oil & Gas Company,	P. O. Drawer 570, Farm	ington, New Memico 67401					
11.	DESCRIPTION OF WELL AND L.	1.5.1.145.		or Fee Federal SF-017874					
	Hanks	#15 Basin Dakot	ta John Constitution	rederal Sr-3 33					
Unit Letter B: 1175 Feet From The North Line and 2450 Feet From The East									
	Line of Section 6 Town	ship 27 North Range	9 West NMPM,	San Juan County					
11.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate (A) Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) ADDRESS (Give address to which approved copy of this form is to be sent)								
	Plateau, Inc.	1	P. O. Box 108, Farmington, New Mexico 87401 Address (Give address to which approved copy of this form is to be sent)						
	Southern Union Gather	ing	Fidelity Union Tower, D	allas, Texas 75201					
	If well produces on or liquids, give location of lands.		rive commingling order number:						
IV.	If this production is commingled with COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.					
	Designate Type of Completion		71.51	P.B.T.D.					
	Date Spudses	Date Compl. Ready to Prod.	Total Depth						
	Elevations (DF, E.K.S., RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
	Periorations			Depth Casing Shoe					
			DEPTH SET	SACKS CEMENT					
	HOLE SIZE	CASING & TUBING SIZE							
V.	. TEST DATA AND REQUEST FO	fter recovery of total volume of load oil o pth or be for full 24 hours)	and must be equal to or exceed 199 3.194.						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i, etc.)					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size					
	Actual Prod. During Test	Cil-Bbis.	Water-Ribis. JA	Gan-MOF V 12 1978					
			Ł.	OH. COM.					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Contensate					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
VI	I. CERTIFICATE OF COMPLIANCE	CE	11	ATION COMMISSION					
	I hereby certify that the rules and r	egulations of the Oil Conservation	APPROVED, 19						
	I hereby certify that the rules and a Commission have been complied we above is true and complete to the								
	,/		TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended 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.						
		Kill and the second							
	District Produc	etion Mar							
	(Ti								
	1 - 1 - 78	ate)	Fill out only Sections I, I well name or number, or transpor	I. III, and VI for changes of owner, ten or other such change of condition					
	1		Separate Forms C-104 must completed wells.	Separate Forms C-104 must be filled for each pool in multiply completed wells.					