STATE OF NEW MEXICO ENERGY NO 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 06-01-63 Page 1

	LAME OFFICE					•		
•	TRANSPORTER OIL	REQUEST FOR ALLOWABLE						
	048							
	OPERATOR .	AND						
	PAGE AT ION OFFICE	AUTHORIZATION TO T	RANSPORT OF	L AND NATURAL	_ GAS			
~~. i	l. Operator							
		•				es.		
	Southland Royalty Comp	any						
1		NM 07400		•				
}	P. O. Box 4289, Farmin	gton, NM 8/499	···-·	100				
- "		Change in Transporter of:		Other (Please exp	ien,			
	New Well		Dry Ges	1				
	Regulation	7						
٠ ل	Change in Ownership	Cesineheed Ges	(X) Condensate	<u> </u>				
	f change of ownership give name ad address of previous owner							
I	I. DESCRIPTION OF WELL AND LE							
Γ	Leese Name	Well No. Pool Name, inclu		1	t of Lease	NW 017723		
L	Reid	22R Basin Dak	ota	Stat	e.(Federal)or Fee	NM 01772A		
Γ	Location	Canal		1620				
- 1	Unii Leiler : 1480	_Feet From The	Line and	1630	et From The	East —————————		
ł			_		San Jua	•		
L	Line of Section 7 Township	28N Acres	9W	, NMPM,	Sall Jua	Co.		
	II. DESIGNATION OF TRANSPORT							
	Name of Authorized Transporter of CII	er Condensate 🛴	1		-	IALS JOIM IS 10 be SEAL)		
L	Meridian Oil Inc. P. O. Box 1599, Aztec, NM 87410 Name of Authorized Transporter of Casinghed Gas of Dry Gas X Address (Give address to which approved copy of this form is to be sent)							
- '	Name of Authorized Transponer of Casingne Southern Union Gathering (O. Box 1899,				
L					when			
	f well produces all or liquids, Unit	. Sec. Two Re		inaith courscies;	, waen			
	THE RESIDENCE TONES.			······································	 			
If	this production is commingled with the	t from any other lease or	pool, give comm	ungling order num	ber:			
N	OTE: Complete Parts IV and V on							
			11	_		•		
V	. CERTIFICATE OF COMPLIANCE	j.	- 11	OIL CONS	ERVATION DI	VISION		
٠.					VIIC.	1 511986.		
I hereby certify that the rules and regulations of the Oil Conservation Division have heen compiled with and that the information given is true and complete to the best of						\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 		
	knowledge and belief.	it is true and complete to the or	BY		Trank JU	<u> </u>		
				_	SUPER	VISOR DISTRICT # 1		
,			TITLE					
	Acces ()		ותד	is form is to be fi	led in compliance	with RULE 1104.		
7	//yyy & soak	F4,	11 1	his is a request f	or allowable for a	newly drilled or deep		
	(Signature) well, this form must be accompanied by a tabulation of the							
	Drilling C1	erk 7				i out completely for al		
	(Tula) 9-1-86		able on	new and recomple	ted wells.			
	(Date)	13/386				VI for change of ow such change of condi		
					H must be filed	for each pool in mul:		
		DIV.	il complete	d weils.				
		Parity,				•		