STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT	•
ONTERNATION 1 3 10 U CONSERVA	Form G-104 Revised 10-01-78 ATION DIVISION Formet 05-01-43
P. O. 80	7X 2088
LAMP OFFICE	N MEXICO 87501
TRAMPORTES OIL C	
REQUEST FO	RALLOWABLE
PROBATION OFFICE	ND /
I. AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS CONTRACTOR OF THE PORT OF THE
Operator	
Southland Royalty Company	R ALLOWABLE ND PORT OIL AND NATURAL GAS
PO Box 4289, Farmington, NM 87499	
Resear(s) for filing (Check proper box)	Other (Please explain)
Now Well Change in Transporter of:	
Recompletion Oil Made	y Ges
Change in Ownership Casinghood Gas	ondena ette
If change of ownership give name and address of previous owner	·
II DESCRIPTION OF WELL AND LEASE	
IL DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including F.	ormation Kind of Lease
cGrath 3 Fulcher Kutz P	
J 1650 South Unit Letter English The Lin	1650 East
3 _ 29N	12W San Juan
Line of Section Township Range	, NMPM, Coun
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	"GAS
Name of Authorized Transporter of Cil	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	PO Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Castnehood Gos or Dry Gos unterra Gas Gathering Co.	P.O. Box 1899, Bloomfield, NM 87413
If well produces oil or liquide. Junit Sec. Twp. Rec.	is gas setudity connected? When
If this production is commingled with that from any other lease or pool,	Tive compaging order numbers
	fire committeeting order unmost
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	JUN 2 2 1987
been complied with and that the information given is true and complete to the best of	7.12
my knowledge and belief.	ev_ out them
	TITLE SUPERVISION DISTRICT # 3
100 (1)	This form is to be filed in compliance with RULE 1104.
Was In Load	If this is a request for allowable for a newly drilled or deepe
Drilling Clerk (Signature)	well, this form must be accompanied by a tabulation of the deviations taken on the well in accordance with AULE 111.
May 15, 1987	All sections of this form must be filled out completely for all able on new and recompleted wells.
(Dee)	Fill out only Sections I. II. III. and VI for changes of own well name or number, or transporten or other such change of condit.
	Secrete Ferma Calife must be filled for each and to a live