

STATE OF NEW MEXICO
 DEPARTMENT OF REVENUE
 OIL CONSERVATION DIVISION
 P.O. BOX 2088
 SANTA FE, NEW MEXICO 87501

Form OCM
 Revised 10/87
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OIL CONSERVATION DIVISION
 P. O. BOX 2088
 SANTA FE, NEW MEXICO 87501

RECEIVED
 DEC 3 0 1988
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator: SOUTHALND ROYALTY COMPANY
 Address: P.O. BOX 4289, FARMINGTON, NM 87499
 Purpose: ☒ For filling (Check proper box)
☐ New Well
☐ Reoperation
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Condensate Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain): POOL NAME & DEDICATION CHANGE
 Change of ownership give name and address of previous owner: _____

II. DESCRIPTION OF WELL AND LEASE
 Lease Name: BURNT MESA Well No.: 101 Pool Name, Reservoir Formation: BASIN FRUITLAND COAL Kind of Lease: State, Federal or Fed Lease No.: NM-2996
 Location:
 Unit Letter: N : 1175 Feet From The South Line and 1500 Feet From The West
 Line of Section: N Township: 25 Range: 32N NMPA: 7a San Juan County: San Juan

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil ☐ or Condensate ☒
MERIDIAN OIL INC. Address (Give address to which approved copy of this form is to be sent): P.O. BOX 4289, FARMINGTON, NM 87499
 Name of Authorized Transporter of Gas or Condensate ☐ or Dry Gas ☒
EL PASO NATURAL GAS COMPANY Address (Give address to which approved copy of this form is to be sent): P.O. BOX 4990, FARMINGTON, NM 87499
 If well produces oil or liquids, give location of tanks: _____ Unit: _____ Sec.: _____ Twp.: _____ Rge.: _____
 Is gas actually connected? ☒ Yes ☐ No

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]
 REGULATORY AFFAIRS
 (Title)
DECEMBER 27, 1988
 (Date)

OIL CONSERVATION DIVISION
 APPROVED DEC 30 1988, 19 _____
 BY [Signature]
 TITLE SUPERVISION DISTRICT # 3
 This form is to be filed in compliance with RULE 1104.
 If this is a request for allowance for a newly drilled or deep 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 wells on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of conditions.
 Separate Forms OCM must be filed for each pool in the completed wells.