

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Southland Royalty	Well API No.
Address	PO Box 4289, Farmington, NM 87499	
Reason(s) for Filing (Check proper box)	☒ New Well ☐ Recompletion ☐ Change in Operator	
Change in Transporter of:	☐ Oil ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Grenier	102	Basin Fruitland Coal	State, Federal or Fee	SF-078115
Location				
Unit Letter	K	1865 Feet From The	South	Line and 1330 Feet From The
Section	18	Township	31	Range 11, NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	☐ or Condensate	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 Casinghead Gas	☐ or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
El Pas- Natural Gas Company	☒	PO Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 18
	Twp. 31N	Rge. 11W
	Is gas actually connected? When?	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
4-19-89	05-03-89		2673					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6090' GL	Fruitland Coal		2566'		2633'			
Perforations	2566-68', 2573-74', 2575-78', 2615-24', 2626-38'				Depth Casing Shoe			
w/2 spf					2673'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		231'		177 cu.ft.			
8 3/4"	7"		2555'		813 cu.ft.			
6 1/4"	4 1/2"		2673'		98 cu.ft.			
	2 3/8"		2633'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

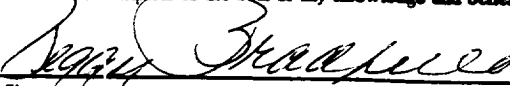
Date First New Oil Run To Tank	Date of Test	Productive Method (Flow, pump, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
backpressure	775	NC	

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.


Signature
Peggy Bradfield, Regulatory Affairs
Printed Name
6-1-89
Date
326-9727
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 08 1989
By Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT 17
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.