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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator		SOUTHLAND ROYALTY COMPANY	
Address			
P. O. Drawer 570, Farmington, New Mexico 87401			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	NAME CHANGE
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change give name and address of previous owner Aztec Oil & Gas Company, P. O. Drawer 570, Farmington, New Mexico 87401

DESCRIPTION OF WELL AND LEASE		Well No.		Pool Name, including Formation		Kind of Lease		Lease No.							
Lease Name		#4		Fulcher Kutz Pictured Cliffs		State, Federal or Fee Federal		SF-077035							
Location															
Unit Letter		E		2310		Feet From The North		Line and 990		Feet From The West					
Line of Section		20		Township		29 North		Range		11 West		San Juan		County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)									
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Southern Union Gathering		Fidelity Union Tower, Dallas, Texas 75201									
If well produces oil or liquids, give location of tanks.		Unit		Sec.		Twp.		Rge.		Is gas actually connected?		When	

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

COMPLETION DATA		Designate Type of Completion - (X)		Oil Well		Gas Well		New Well		Workover		Deepen		Plug Back		Same Res'tv.		Diff. Res'tv.	
Date Spudded		Date Compl. Ready to Prod.		Total Depth		P.B.T.D.													
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth													
Perforations						Depth Casing Shoe													
TUBING, CASING, AND CEMENTING RECORD																			
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT													

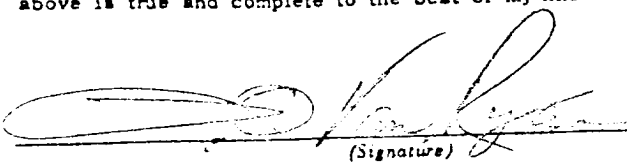
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)			
Length of Test		Tubing Pressure		Casing Pressure		Choke Size	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.		Gas-MCF	

GAS WELL		Actual Prod. Test-MCF/D		Length of Test		Bbls. Condensate/MCF		Gravity of Condensate	
Testing Method (pilot, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size			

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)  
District \_\_\_\_\_  
(Title)  
1-1-78  
(Date)

OIL CONSERVATION COMMISSION  
JAN 12 1978  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick  
TITLE SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened 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.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.