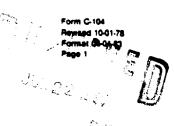
## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| <b>100.00</b> 10044 MILES | •  |
|---------------------------|----|
| DIGTRIBUTION              |    |
| SAMTA FE                  |    |
| PILE                      |    |
| U.S.B.S.                  |    |
| LAMO OFFICE               |    |
| TRAMPORTER                | P. |
|                           | 46 |
| OPERATOR                  |    |
| PROBATION OFFICE          |    |

## OIL CONSERVATION DIVISION P. O. BOX 2086 SANTA FE, NEW MEXICO 87501



## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| i.   | AUTHORIZ             | CATION TO      | TRANS     | PORT OIL AND NA                     | TURAL GAS                   |  |  |
|--|----------------------|----------------|-----------|-------------------------------------|-----------------------------|--|--|
| Operator   |                      | <del></del>    |           | •                                   |                             |  |  |
| Southland Royalty  | Company              |                |           |                                     |                             |  |  |
| DO Bon 4290 Formi  | naton M              | M. 8749        | 0         |                                     |                             |  |  |
| PO Box 4289, Farmi Reason(s) for filing (Check proper box)                                     | ngton, N             | VI 3/49        | 9         | 10.5                                | ase explain)                |  |  |
| New Well   | Change in T          | ransporter of: |           | Olner (Field                        | ise expiain)                |  |  |
| Recompletion   | O11                  |                | <u></u>   | 4 Ges                               |                             |  |  |
| Change in Ownership  | Cesingh              | nead Gas       | <b>1</b>  | ondensate .                         |                             |  |  |
| If change of ownership give name   |                      |                |           |                                     |                             |  |  |
| II. DESCRIPTION OF WELL AND  | IEASE                |                |           |                                     |                             |  |  |
| Lesse Name   |                      | ool Name, Inc. | luding F  | ermetion                            | Kind of Lease               | Lease No.  |  |
| ornell   | 4 Fu                 | ılcher Kı      | utz Pi    | ctured Cliff                        | State, Federal or Fee       | SF 076465  |  |
| Location   |                      | 0 11           |           | 1000                                |                             |  |  |
| Unit Letter K 2200   | Feet From 1          | South          | Lin       | 1980                                | Feet From The               | est  |  |
| 12   | 29N                  | _              |           | LIW / S NME                         | G                           |  |  |
| Line of Section Town   | ship                 | Ras            | nge       | ELW / C) , NMF                      | M, Dan Guan                 | County   |  |
| III. DESIGNATION OF TRANSPO  | RTER OF OU           | AND NA         | TTIRAT    | GAS                                 |                             |  |  |
| Name of Authorized Transporter of Cil  | or Cond              | ensate         | TOTOLL    | Address (Give address               | s to which approved copy o  | f this form is to be sent)                           |  |
| Meridian Oil Inc   |                      |                |           | PO Box 428                          | 9, Farmington               | , NM 87499   |  |
| Name of Authorized Transporter of Casin<br>unterra Gas Gathering Co.                           |                      |                |           | P.O. Box 1899, Bloomfield, NM 87413 |                             |  |  |
|  | Unii Sec.            | Twp.           | Rge.      | is gas actually connec              |                             |  |  |
| If well produces oil or liquids, give lecetion of tanks.                                       | 12                   | P 1            | LÍW       |                                     |                             |  |  |
| If this production is commingled with  | that from any o      | ther lesse o   | r pool, ( | rive commingling ord                | er number:                  | <del> </del>   |  |
| NOTE: Complete Parts IV and V  | on reverse side      | if necessary   | у.        |                                     |                             |  |  |
| VI. CERTIFICATE OF COMPLIANCE  | CF                   |                | İ         | OIL                                 | CONSERVATION DIV            | VISION   |  |
| vi. CERTIFICATE OF COMPENSATION  | - <b></b>            |                |           |                                     |                             | JMN 22 1987  |  |
| I hereby certify that the rules and regulations<br>been complied with and that the information |                      |                | - 11      | APPROVED                            | <del></del>                 | •              |  |
| my knowledge and belief.   | given is a de and co | ompiete to the | LESI OI   | BY                                  | Drawfur.                    | Savez/   |  |
|  | •                    |                | - 1       |                                     | S                           | SUPERVISOR DISTRICT # 3                              |  |
|  |                      | *              |           | TITLE                               | <del></del>                 |  |  |
| April 1  | -1                   |                |           | This form is t                      | o be filed in compliance    | With RULE 1104.                                      |  |
| Drilling Clerk   | 11                   |                |           | well, this form mu                  |                             | newly drilled or deepene tabulation of the deviation |  |
| (Title)  |                      |                |           |                                     | f this form must be fille   | d out completely for allow                           |  |
| May 15, 1987   |                      |                | _         | Fill out only                       | Sections I. II. III. and    | VI for changes of owner                              |  |
| (Date)   |                      |                |           | well name or number                 | ir, or transportes or other | such change of condition                             |  |
|  |                      |                | 11        | Separate Form completed wells.      | E C-104 must be filed       | for each pool in multipl                             |  |