

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

JAN 09 1986

OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Southland Royalty Company
Address
P. O. Drawer 570, Farmington, New Mexico 87499
Reason(s) for filing (Check proper box)
☒ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Medio Canyon	Well No. 4	Pool Name, including Formation West Lindrith Gallup-Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. Jic Cont 416
Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>25</u> Township <u>24N</u> Range <u>4W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, Arizona 85068
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 90, Farmington, New Mexico 87499
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>25</u> Twp. <u>24N</u> Rge. <u>4W</u>	Is gas actually connected? <u>No</u> When

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.

Arthur J. Grejner
(Signature)

Secretary

(Title)

1-8-86

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN - 9, 1986

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT #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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well X	Gas well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-22-85	Date Compl. Ready to Prod. 11-21-85		Total Depth 7525'		P.B.T.D. 7490'				
Elevations (DF, RKB, RT, GR, etc.) 7057' GL	Name of Producing Formation Gallup-Dakota		Top Oil/Gas Pay 6209'		Tubing Depth 7096'				
Perforations 6209'-7303'					Depth Casing Shoe 7524'				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8", 24#, H-40		240'		180 sacks - 212 cu.ft.				
7-7/8"	4-1/2, 11.5&10.5#, K-55		7524' (3 Stages)		840 sacks - 1190 cu.ft.				
	2-3/8", 4.7#, J-55		7096'						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL			
Date First New Oil Run To Tanks 12-31-85	Date of Test 1-1-86	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 380#	Casing Pressure --	Chest Size 1-1/4"
Actual Prod. During Test GOR 12733/1	Oil - Bbls. 90	Water - Bbls. 2	Gas - MCF 1146

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (Plot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Chest Size