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| U.S.G.S.           |      |   |          |
| LAND OFFICE        |      |   |          |
| IRANSPORTER        | OIL  | 1 | <u> </u> |
|                    | GAS  | 1 |          |
| OPERATOR           |      |   |          |
| PORATION OFFICE    |      |   |          |

NEW MEXICO OIL CONSERVATION COMMISSION ersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Southland Royalty Company

| P. O. Drawer 570, Fa   | armington, New           | Mexico 8                                | 37401   |  |                |                   | ·              |                |
|--|--------------------------|---|---|--|----------------|-------------------|----------------|----------------|
| Reason(s) for filing (Check proper box)  |                          |   | 0   | her (Please e                                | xplain)        | -                 | •              | ļ              |
| New Well   | Change in Transport      | er of:                                  |   |  |                |                   |                | İ              |
| Recompletion   | Oil                      | Dry Ga                                  | s   |  | Nai            | ne chan           | ge             | į              |
| Change in Ownership  | Casinghead Gas           | ] Conden                                | sate  |  |                |                   |                |                |
| Citary   |                          |   |   |  |                |                   |                | 0.00           |
| If change give name A and address of previous ownerA   | ztec Oil & Gas           | Company,                                | P. O. D:                                      | rawer 570                                    | ), Farmi       | ngton, No         | ew Mexic       | o 87401        |
| and address of previous owner  |                          |   |   |  |                |                   |                |                |
| The second secon | CACE                     |   |   |  |                |                   |                |                |
| DESCRIPTION OF WELL AND I  | Well No. Pool Nam.       | e, including Fo                         | ormation                                      | 1  | Kind of Lease  | Jicaril:          | la             | Lease No.      |
| <b>,</b> -   | 1 1                      | Wildhorse                               |   | :  | State, Federal | or Fee Apac       | che Cont       | ract-101       |
| Jicarilla "101"  |                          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   |  |                | _                 |                |                |
| Location   | Feet From The            | South                                   | 8 د۔۔ .                                       | 90   | Feet From T    | he Wes            | t              |                |
| Unit Letter M ; 790  | Feet From The            | <u> </u>                                | e and   |  |                |                   |                |                |
| 12   | nship 26 North           | Range                                   | 4 West  | , NMPM,                                      | Rio            | Arriba            |                | County         |
| Line of Section 12 Tow   | nship Zo NOTER           |   | 11000   |  |                |                   |                |                |
|  | en or out AND NA         | TUPAT GA                                |   |  |                |                   |                |                |
| DESIGNATION OF TRANSPORT   | or Condensate            | TERME G.                                | Address (G                                    | ive address to                               | which approx   | ed copy of th     | is form is to  | be sent)       |
| 1  | G Camaran                |   | P 0.  | Box 108.                                     | Farming        | ton, New          | Mexico         | 87401          |
| Plateau, Inc. Name of Authorized Transporter of Cas  | Chartenad Cos : 55 DE    | v Gas                                   | Address (G                                    | ive address to                               | which approx   | ed copy of th     | is form is to  | he sent)       |
|  |                          |   |   |  |                | dg., Dall         |                |                |
| Gas Company of New   | Mexico<br>Tunit Sec. Two | . Fçe.                                  |   | ally connecte:                               |                | en .              |                |                |
| If well produces oil or liquids,   | Unit Sec. Two            |   |   |  | ì              |                   |                |                |
| i give location of tanks.  |                          |   |   |  |                | ,                 |                |                |
| If this production is commingled wit   | h that from any other 1  | ease or pool,                           | give commi                                    | ngling order                                 | number:        |                   | <del> </del>   |                |
| COMPLETION DATA  | Oil Well                 | Gas Well                                | New Well                                      | Workover                                     | Deepen         | Plug Back         | Same Res'v     | . Diff. Res'v. |
| Designate Type of Completio  |                          | 335 46.1                                | 1   | 1  | 1              | 1                 | 1              | 1              |
| Designate Type of Completion   |                          | _ !                                     | Total Dept                                    | <u>:                                    </u> | <u> </u>       | P.B.T.D.          | .1.,           |                |
| Date Spudded   | Date Compl. Ready to P   | roa.                                    | Total Dept                                    | •  |                |                   |                |                |
|  |                          |   | 1   |  |                | Tubing Depth      |                |                |
| Elevations (DF, RKB, RT, GR, etc., Name of Producing Format  |                          | ranot:                                  | Top Oll/Gas Pay                               |  |                |                   |                |                |
|  |                          |   |   |  |                | Depth Casing Shoe |                |                |
| Periorations   |                          |   |   |  | •              | 1                 |                |                |
|  |                          |   |   |  |                | 1                 |                |                |
|  |                          | CASING, AN                              | D CEMENT                                      |  |                | T -               | ACKS CEME      | ENT            |
| HOLE SIZE  | CASING & TUB             | ING SIZE                                | :<br>_ <del></del>                            | DEPTH SE                                     | T              |                   | ACKS CEME      | . 1            |
|  |                          |   |   |  |                |                   |                |                |
|  |                          |   |   |  |                | <del> </del>      |                |                |
|  |                          |   | ·   | <u></u>                                      |                | <del> </del>      | . <u> </u>     |                |
|  |                          |   | <u> </u>                                      |  |                | <u>.i</u>         |                |                |
| The state of the s | OR ATTOWARTE             | (Test must be                           | after recovery                                | of total volu                                | me of load oil | and must be       | equal to or ex | ceed top allow |
| . TEST DATA AND REQUEST F  | ON MERCHANER (           | able for this d                         | lepth or be fo                                | full 24 hours                                | )              |                   |                |                |
| OII. WELL , Date First New Oil Run To Tanks  | Date of Test             |   | Producing Method (Flow, pump, gas lift, etc.) |  |                |                   |                |                |
| Date tillst New Oil Man 10 1 mins  |                          |   | 1   |  |                |                   |                |                |

Casing Pressure Tubing Pressure Length of Test Water - Bale. Oil-Bals. Actual Prod. During Test

|                                  |                           |                             | 4 47    |                       |  |  |
|----------------------------------|---------------------------|-----------------------------|---------|-----------------------|--|--|
|                                  |                           |                             | JANZ    | 2 3025                |  |  |
| GAS WELL Actual Prod. Test-MCF/D | Length of Test            | Bbls. Condensate/MMCF       | OIL COV | Gravity of Condensate |  |  |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-      | Kat     | Choke Size            |  |  |
| L CERTIFICATE OF COMPLIANCE      |                           | OIL CONSERVATION COMMISSION |         |                       |  |  |

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.

(Date)

District Production Mgr.

(Title) 1 - 1 - 78

JAN 1 2 1978 APPROVED\_ Original Signal by A. R. Kendrick

TITLE .

This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despensed 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.