

OIL CONSERVATION DIVISION

**P.O. Box 2088
Santa Fe, New Mexico 87504-2088**

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

Southland Royalty co

Well API No.

30-045-07436

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 ☐ Dry Gas ☐
 Casinghead Gas ☐ Condensate ☐

change of operator give name and address of previous operator

I. DESCRIPTION OF WELL AND LEASE

Lessee Name McClanahan	Well No. 12	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State (Federal) or Fee	Lease No. SF-079634
Location				
Unit Letter <u>K</u> : <u>1450</u> Feet From The <u>North</u> Line and <u>1690</u> Feet From The <u>East</u> Line				
Section <u>13</u> Township <u>28</u> Range <u>10</u> , <u>NMPM</u> San Juan County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ <u>Meridian Oil Inc.</u>					Address (Give address to which approved copy of this form is to be sent) <u>PO Box 4289, Farmington, NM 87499</u>	
Name of Authorized Transporter of Compressed Gas ☐ or Dry Gas ☒ <u>Sunterra Gas Gathering</u>					Address (Give address to which approved copy of this form is to be sent) <u>PO Box 1899, bloomfield, NM 87413</u>	
Well produces oil or liquids, or location of tanks.	Unit K	Sec. 13	Twp. 28	Rge. 10	Is gas actually connected?	When?
This production is commingled with that from any other lease or pool, give commingling order number:					DHC-828	

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
10-22-59		X						X
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
10-22-59	11-28-91		1935'					
Levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
5703'DF	Fruitland Coal		1722'			1850'		
Perforations						Depth Casing Shoe		
1722-34', 1768-76', 1830-40' w/4" spf								

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8 5/8"	160' / 6.7	100 sx
	4 1/2"	1922' 14.35	75 sx
	2 3/8"	1850'	

TEST DATA AND REQUEST FOR ALLOWABLE

IL 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.)

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

AS WELL

Test Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (inst., back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
backpressure	SI 230 DWT	SI 230 DWT	

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.

Peggy Bradfield
Signature _____
Peggy Bradfield Reg. Affairs
Printed Name _____ Title _____
1-3-92 326-9700
Date _____ Telephone No. _____

OIL CONSERVATION DIVISION

Date Approved _____ APR 17 1992

By Burt D. Chang
SUPERVISOR DISTRICT #3

Title _____ **SUPERVISOR DISTRICT** **#3**

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.