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TRANSPORTER	OIL	1
	GAS	
OPERATOR		
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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

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 Reid	Well No. 25	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee NM-01772A	Lease No.
Location Unit Letter I ; 1650 Feet From The South Line and 790 Feet From The East Line of Section 19 Township 28N Range 9W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 108, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899, Bloomfield, New Mexico 87413					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					no	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7-30-78	Date Compl. Ready to Prod. 10-25-78	Total Depth 4726'		P.B.T.D. 4701'					
Elevations (DF, RKB, RT, GR, etc.) 5875' GR	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 4343'		Tubing Depth 4477'					
Perforations				Depth Casing Shoe 4726'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	9 5/8"		231'		110 sacks				
8 3/4"	7"		2341'		195 sacks				
6 1/4"	4 1/2"		2196' - 4726'		270 sacks				
	2 3/8"		4477'						

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 1,299	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, back pr.) Back Pressure	Tubing Pressure (shut-in) 459 PSIG	Casing Pressure (shut-in) 917 PSIG	Choke Size 3/4"

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.

District Production Manager

(Signature)

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY Original Signature of _____

TITLE _____

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.