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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

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. 30-045-08238
Address PO Box 4289, Farmington, NM 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name and address of previous operator \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cozzens	Well No. 1	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State/Federal/Other Fee	Lease No. SF-077056
Location Unit Letter <u>K</u> : <u>1320</u> Feet From The <u>South</u> Line and <u>1570</u> Feet From The <u>West</u> Line Section <u>18</u> Township <u>29</u> Range <u>11</u> 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"/> Meridian Oil Inc. 2393910	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Sunterra Gas Gathering 2393930	Address (Give address to which approved copy of this form is to be sent) PO Box 1899, Bloomfield, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 18	Twp. 29	Rge. 11	Is gas actually connected?	When?

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 <input checked="" type="checkbox"/>	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res v	Diff Res v <input checked="" type="checkbox"/>
Date Spudded 04-07-43	Date Compl. Ready to Prod. 12-01-90		Total Depth 1957'		P.B.T.D. 1865			
Elevations (DF, RKB, RT, GR, etc.) 5751' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1620'		Tubing Depth 1858'			
Performances 1620-26', 1711-20', 1760-63', 1801-05', 1813-19', 1827-31',			1842-49', 1854-62'		Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	46" 10 3/4"		60" 892					
	5 1/2"		1874'					
	1 1/4"		1858'					
	3 1/2"		1949		110			

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 Tank	Date of Test	Production Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

**RECEIVED**  
AUG 14 1991  
OIL CON. DIV  
DIST. 3


**RECEIVED**  
DEC 18 1990  
OIL CON. DIV.  
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (press. back pr.) backpressure	Tubing Pressure (Shut-in) SI 495	Casing Pressure (Shut-in) SI 627	Choke Size

VI. 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.

  
Signature  
Peggy Bradfield Reg. Affairs  
Printed Name Title  
12-15-90 326-9700  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 14 1991

By Original Signed by FRANK T. CHAVEZ

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.