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

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

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Southland Royalty Co		Well API No.
Address PO Box 4289, Farmington, NM 87499		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of:	
Recompletion ☒	Oil ☐ Dry Gas ☐	Commingled Chacra/Mesa Verde
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐	

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cain	Well No. 3R	Pool Name, including Formation Otero Chacra	Kind of Lease State, Federal or Fee	Lease No. SF-080781
Location Unit Letter I 1610 Feet From The South Line and 810 Feet From The East Line Section 30 Township 29 Range 9, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Meridian Oil Inc.	Address (Give address to which a approved copy of this form is to be sent) PO Box 4289, Farmington NM 87499					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Sunterra Gas Gathering	Address (Give address to which a approved copy of this form is to be sent) PO Box 1899, Bloomfield NM 87413					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 30	Twp. 29	Rge. 9	Is gas actually connected?	When?
If this production is commingled with that from any other lease or pool, give commingling order number:						DHC-798

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X						X
Date Spudded 07-24-78	Date Compl. Ready to Prod. 08-26-91	Total Depth 4651'	P.B.T.D. 4576'					
Elevations (DF, RKB, RT, GR, etc.) 5701' GR	Name of Producing Formation Otero Chacra	Top Oil/Gas Pay 3156'	Tubing Depth 4456'					
Perforations 3178-69', 3165', 3156'			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	9 5/8"	234'	120 SX					
8 3/4"	7"	2292'	200 SX					
6 1/4"	4 1/2"	4648'	300 SX					
	2 3/8"	4456'						

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	Producing Method (Flow, pump, gas lift, etc.)	RECEIVED SEP 25 1991 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	
GAS WELL			
Actual Prod. Test - MCF/D 1628	Length of Test 3 hrs	Bbls. Condensate/MMCF --	Gravity of Condensate --
Testing Method (puor, back pr.) backpressure	Tubing Pressure (Shut-in) 548	Casing Pressure (Shut-in) 548	Choke Size 3/4"

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
9-19-91 Title
326-9700
Date
Telephone No.

OIL CONSERVATION DIVISION

SEP 25 1991

Date Approved

By

SUPERVISOR DISTRICT #3

Title

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.