Submit 5 Copies
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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Sorte Fe New Maxico 87504 2088

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

Santa Fe, New Mexico 87504-2088

UOO Rio Brazos Rd., Azzec, NM 87410			-		LE AND AND NA		-	S				
Operator Southland Roya	ltv Com	กกลทบ						Well /	PI No.			
Address PO Box 4289	·	ington	NM	87499								
Resson(s) for Filing (Check proper box) New Wall	rariii	Change in			Oth	er (Pleas	e explai	in)		· · · · · · · · · · · · · · · · · · ·		
Recompletion	Oil		Dry G	L								
Change in Operator	Casinghea	d Gas	Conde									
change of operator give name ad address of previous operator						 						
L DESCRIPTION OF WELL	LL AND LEASE Well No. Pool Name, Including							Kind	f Lease	Le	ase No.	
Primo Mudge		100	1		1 Ft. B		Coa 1	State,	Federal or Fee	SF-07	8039A	
Coation Unit Letter	. 11	20	Engl E	imm The	South Lin	and	1450	· 15a	et From The	West	Line	
	- · <u> </u>							an Juar			County	
Section 24 Township		2N	Range			MPM,	<u> </u>	all Qual			County	
II. DESIGNATION OF TRAN	SPORTE	R OF O		ND NATUI ┌X┐	RAL GAS Address (Gi	we addres	s to wh	ich approved	copy of this fo	orm is to be se	nt)	
Meridian Oil.								gton, NM 87499				
Name of Authorized Transporter of Casing				y Gas 💢	1				copy of this fo			
El Paso Natura If well produces oil or liquids,	L]_Gas/ Umit	Meridi Sec	an C	il Inc				Farm) When	ngton.	0/4	7.7	
ive location of tanks.				<u> </u>				i				
this production is commingled with that it. V. COMPLETION DATA	from any oth	er lease or	pool, g	ive comming!	ing order nun	nber:				<u> </u>		
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Work	over	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		pl. Ready to	Prod.		Total Depth	.1		L	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay				Tubing Depth		
Perforations									Depth Casing Shoe			
		TUBING,	CAS	ING AND	CEMENT	ING R	COR	D		-		
HOLE SIZE					DEPTH SET					SACKS CEM	ENT	
				<u> </u>								
/. TEST DATA AND REQUES	T FOR	ALLOW	ARI.I	F.	<u> </u>							
IL WELL (Test must be after r					t be equal to a	or exceed	top allo	wable for the	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te				Producing N	Method (1	low, pu	mp, gas lift,	elc.)	A	e 63	
Length of Test	Tubing Pressure				Casing Pressure				PER	S I A	E []	
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.				APR 2 7 1990			
GAS WELL	_1								OIL C		IV.	
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF				Gravity of Continues			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
VI. OPERATOR CERTIFIC						OIL	CON	ISERV	ATION	DIVISIO	NC	
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.					Date Approved APR 2 7 1990							
Leslie 9	Sah	Was	· U			• •		7 1	d			
Signature Leslie Kahwaj Printed Name	y-Prod	. Serv	. Su	uperviso	11			SUPERV	ISOR DIS	TRICT !	13	
Printed Name 04-25-90	(505)	326 -9 7		- No	Titl	е						

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.