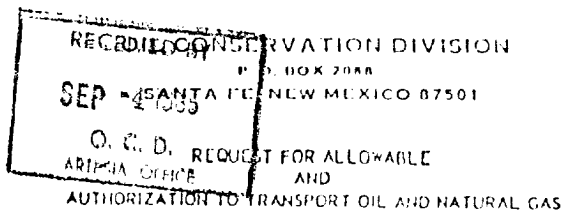


DATE OF FILING	
DISTRICT	
SANTA FE	☒
FILE	☒
U.S.S.	
LAND OFFICE	
TRANSPORTER	☒
OPERATOR	☒
PERMITTING OFFICE	☒
Operator	



1. OPERATOR
Southland Royalty Company
Address
21 Pesta Drive, Midland, Texas 79705
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	Well No.	Pool Name, Including Formation	State, Federal or Fee	Lease No.
Dale H. Parke "A" Tr. 1	9	Grayburg-Jackson (O.S.R.G.SA)	Federal NM-0467930	
Location	Unit Letter	Feet From The	Line and	Feet From The
	C	990	North	2310
			Line and	West
Line of Section	22	To Township	17S	Range
			30E	N.M.P.M.
				Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (State address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Company	Box 1510, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (State address to which approved copy of this form is to be sent)
Continental Oil Company	P. O. Box 460, Hobbs, New Mexico 88240
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
C 22 17S 30E	yes Unknown

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Cut well	Gas well	New well	Workover	Deepen	Plug back	Same hole	Other
XX			XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	PLS. T.D.					
1-15-85	8-9-85	3575'	Open hole					
Elevations (DF, RAB, AT, GR, etc.)	Name of Producing Formation	Top Oil Gas Pay	Testing Depth					
3676.5' GR	San Andres & Premier	2878'	3495'					
Perforations			Depth Casing Shoe					
3221-3575' open hole & 2878-2944' (37 holes)								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	452'	350-sx.					
7 7/8"	5 1/2"	3221'	1275-sx.					
	2 3/8"	3495'						

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 test oil 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.)	
8-9-85	8-22-85	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs			
Actual Prod. During Test	Oil-Gals.	Water-Gals.	Gas-MCF
24 BO	24	120	10

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bole, Condensate/MCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

VI. 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.

Lanell Roberts
(Signature)
Operations Engineer
(Title)
9/4/85
(Date)

OIL CONSERVATION DIVISION

SEP 10 1985
APPROVED
Original Signed By
tes A. Clements
TITLE
Supervisor District II

This form is to be filed in compliance with RULE 111.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, transporter, or other such change of condition.
Separate Form C-104 must be filed for each pool in multi-completed wells.