

DISTRIBUTION	
DATE FILED	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL /
	GAS /
OPERATOR	/
PRODUCTION OFFICE	

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-105  
Effective 1-1-65

Operator Southland Royalty Company	
Address P.O. Drawer 570, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name Richardson	Well No. 4A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee SF-077651	Lease No.
Location				
Unit Letter K	1460	Feet From The South	Line and 1580	Feet From The West
Line of Section 10	Township 31N	Range 12W	NMPM, San Juan	County

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) Box 108, Farmington, New Mexico	
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) Box 1899, Bloomfield, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? <input checked="" type="checkbox"/> No	
	When	

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

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 3-19-78	Date Compl. Ready to Prod. 4-3-78	Total Depth 5394'	P.B.T.D. 5302'					
Elevations (DF, RKB, RT, GR, etc.) 6206' GR	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 5042'	Tubing Depth 5226'					
Perforations 5042' - 5278' Point Lookout	Depth Casing Shoe 5390'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8"	223'	110 SXS
8-3/4"	7"	3005'	280 SXS
6-1/4"	4-1/2"	2845' - 5390'	375 SXS
	2-3/8"		

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 4,761 MCF/D	Length of Test 3 Hrs.	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 516 psig	Casing Pressure (Shut-in) 665 psig	Choke Size 3/4"

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.

L. O. VanRyan by CC Parsons  
(Signature)  
District Production Manager  
(Title)  
April 25, 1978  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_  
BY Original Signed By A. R. Kendrick, 19\_\_\_\_\_  
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.