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U.S.G.S.  
LAND OFFICE  
TRANSPORTER  
OIL  
GAS  
OPERATOR  
PROBATION 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-120  
Effective 1-1-65

Operator  
Southland Royalty Company  
Address  
P. O. Drawer 570, Farmington, New Mexico 87401  
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 Childers Well No. 2 Pool Name, Including Formation Blanco PC Kind of Lease State, Federal or Fee Federal Lease No. SF-078040A  
Location  
Unit Letter M : 790 Feet From The South Line and 790 Feet From The West  
Line of Section 1 Township 31N Range 11W, NMPLM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)  
Southern Union Gathering P. O. Box 1899, Bloomfield, NM  
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? No 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 New Well Workover Deepen Plug Back Same Restv. Diff. Restv.  
Date Spudded 8-23-78 Date Compl. Ready to Prod. 9-28-78 Total Depth 3052' P.B.T.D. 3010'  
Elevations (DF, RKB, RT, GR, etc.) 6110' GR Name of Producing Formation Pictured Cliffs Top Oil/Gas Pay 2846' Tubing Depth 2927'  
Perforations 2846' - 2918' Depth Casing Shoe 2927'  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
12 1/4" 8 5/8" 236' 140 sacks  
7 7/8" 5 1/2" 3052' 255 sacks  
1 1/2" 2927'

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 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 1160 Length of Test 3 hours Bbls. Condensate/MMCF Gravitl Condensate  
Testing Method (pilot, back pr.) Back Pressure Tubing Pressure (shut-in) 867 psig Casing Pressure (shut-in) Choke Size 3/4"

VI. 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.  
District Production Manager  
10-11-78

OIL CONSERVATION COMMISSION  
APPROVED \_\_\_\_\_, 19\_\_\_\_\_  
BY \_\_\_\_\_  
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.