

P. O. BOX 7088

SANTA FE, NEW MEXICO 87501

RECEIVED

MAR 13 1979

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE OF ORDER RECEIVED	5
ESTIMATING ITEM	
SALES TO	1
FILE	1
USED	
SALES OFFICE	
TRANSPORTER	
	DIL 1
	OAS 1
OPERATOR	1
SALES OFFICE	

Southland Royalty Company

O. C. C.
~~ARTEDIA OFFICE~~

1100 Wall Towers West, Midland, Tx 79701

Person(s) for listing (Check proper box)		Other (Please explain)	
New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>
		Effective 2-1-79	

If change of ownership give name Shenandoah Oil Corp., 1500 Commerce Bldg., Ft. Worth, Tx 76102
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

DESCRIPTION OF WELL AND LEASE				Kind of Lease	Lease No.
Lessee Name	Well No.	Pool Name, Including Formation		State, Federal or Fee	
Robinson Jackson Unit Tr 2A	7	Grayburg Jackson		Federal	028775-B
Location					
Unit Letter	F	1980	Feet From The	North	Line and 1980
					Feet From The West
Line of Section	35	Township	17S	Range	29E
				NMPM,	Eddy
					County

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Texas-New Mexico Pipeline					P. O. Box 1510-Midland, Tx 79702	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company					4001 Penbrook, Odessa, Tx 79762	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	35	17S	29E	Yes	3-15-62

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

V. COMPLETION DATA

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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)

GIL WELL		Date for this Report	
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

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pirat, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

1. 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.

District Engineer

3-1-79

(1) (u)

OIL CONSERVATION DIVISION

APPROVED MAR 16 1979, 19

BY Walter W. Moore

TITLE OIL AND GAS INSPECTOR

This form is to be filled in compliance with RULE 1.64.

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 III.

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 transport, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiple community wells.