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AUG 12 1980

O. C. D.
ARTESIA, OFFICE

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TEC EXPLORATION, INC.

Abstracts

3027 Briargrove, San Angelo, Tx. 76901

If change of ownership give name and address of previous owner Southland Royalty Company, 1100 Wall Towers West, Midland, Tx. 79701

Lease State Johnson State	Well No. 1	Well Name, Including Formation Artesia (Q.G.S.A.)	Kind of Lease State, Federal or Fee State State	Lease OG-191
Location				
Unit Letter K	: 1760	Feet From The South	Line and 1592	Feet From The West
Line of Section 30	Township 17S	Range 29E	N.M.P.M.	Eddy

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 ☒ or Condensate ☐					P.O. Box 159, Artesia, N.M. 88210	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐					Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Co.					Bartlesville, Ok.	
If well produces oil or liquids, give location of tanks.		Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
		K	30	17S	29E	Yes August 1965

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

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Side Track	Other
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DT, RLB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe		

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

(Test must be after recovery of total volume of load oil and must be equal to or exceed top 5% available 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-PCP/ZD	Length of Test	Bbls. Condensate/MSCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Testing Pressure (Shot-in)	Closing Pressure (Shot-in)	Choke Size

OIL CONSERVATION DIVISION
AUG 12 1980

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.

APPROVED

BY

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with 40 C.F.R. 155.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for each table, on new and recompleted tables.

Fill out only Sections I, II, III, and VI for changes of ownership, name, number, or transporter, or other such change of route. Re-route Form C-102 must be filed for each pool in route.

President

8-1-80

(11.5)