STATE OF NEW MEXICO IGY AND MINIFHALS DEPARTMENT DIATAINUTION BANTA FE FILE U 4.0.0. LAND DEFICE TRANSPORTER OFERATOR	P. O. BO SANTA FE, NEW REQUEST FOR AI		RECEIVED AUG 1 1 1982 O. C. D. ARTESIA, OFFICE
PROPATION OFFICE			
Southland Royalty Company			
21 Desta Drive, Midland, Texas 79701			
Reason(s) for filing (Check proper box New Well) Change in Transporier of:	Other (Please explain)	
Recompletion			
Change In Ownership	Casinghead Gas Conden	Converted to Pro	aucer
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND Lease Name Monterrey "B" State Location	LEASE Well No. Pool Name, Including Fo 4 Shugart (Y,SR,		• Leave No. at or F** State E-6947
Unit Letter F : 198	BO Feet From The North Lin	e and <u>1980</u> Feet From	The West
	mship 185 Range	31E , NMPM, Eddy	County
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of CII	x or Condensate	Address (Give address to which appro	
Texas-New Mexico Pipe Name of Authorized Transporter of Cas None	Singhead Gas or Dry Gas	Box 42130, Houston, Te Address (Give address to which appro	ved copy of this form is to be sent)
If well produces off or liquids, give location of tanks.	Unit Sec. Twp. Rge. F 32 188 31E	is gas actually connected? Wh NA	en
	th that from any other lease or pool,		
COMPLETION DATA	Oil Well Gas Well	Now Well Workover Deepen	Plug Back Same Resty, Diff. Rest
Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded 9-29-60	7-30-82	3681'	2759'
Elevations (DF, RKB, RT, GR, etc.) 3566' DF	Mame of Preducing Formation Yates	Top Oll/Gas Pey 2622'	Tubing Depth 2644'
Perforations			Depth Casing Shoo
2622-36'	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>11"</u> 8"	8 5/8" 5 1/2"	<u>853'</u> 2788'	200 sx.
8	2 3/8"	2644'	
	DR ALLOWARIE (Test must be at	fer recovery of social volume of load oil	and must be equal to or exceed top alls.
Image: TEST DATA AND REQUEST FOR ALLOWABLE (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) 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) OIL WELL (Producing Method (Fiow, pump, gas lift, etc.)			
Date First New Oil Run To Tenks 7-30-82	Date of Test 8-6-82	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choie Size
24 Actual Prod. During Test		Wato: - Bbls.	Gas+MCF
15 BO	15	12	0
GAS WELL Actual Frod. Teel-MCF/D	Longth of Tool	Bbls. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitor, back pr.)	Tubing Procews (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIAN	ERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION ABBROVED AUG 1 2 1982 . 19		
I hereby certify that the rules and regulations of the Oli 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 AUG 1 19	
		BY Action I Comment	
		TITLE SUPERVISOR, DISTRICT I	
F.N. RAN		ll	compliance with AULE 1104. weble for a newly dilled or despension to bus a tabulation of the deviation
(Signature)		well, this form must be accompanied by a insulation of the more than the well in accordance with RULE 111.	
District Operations Engineer		All sections of this form m	ust be filled out completely for sprove salls.
(1:11e) 8/10/82 (Date)		Fill out only Sections 1, 1	II, III, and VI for changes of owner detar other such change of condition
		Beparate Forms C-104 mu	at be filed for each pool in multi; "