		·			
	NO. OF COPIES RECEIVED				
	DISTRIBUTION SANTA FE	1	FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-114	
	U.S.G.S. AUTHORIZATION TO TRANSF		AND ANSPORT OIL AND NATURAL (		
	LAND OFFICE			BEC (154)	
	GAS / OPERATOR /			. AN 16 1980	
I.	PROPATION OFFICE			O. C. D.	
	Southland Royalty C	ompany /		ARTESIA, OFFICE	
	1100 Wall Towers West, Midland, Texas 79701				
	Reason(s) for filing (Check proper box) New We!!				
	Recompletion	Cil Dry Ga			
	Change in Ownership	Casinghead Gas Conder	nsate		
	If change of ownership give name and address of previous owner				
И.	DESCRIPTION OF WELL AND	LEASE Well No.; Pool Name, Including F	ormation Kind of Leas	e TC Lease No.	
	Kenwood	5 Shugart (Y.SI		e IC Lease No. al or Fee FEDeral 71-029387C	
	Location E 165	0 porth	and 990 Free From	west	
	Unit Letter;;	0 Feet From The North Lin		The West	
	Line of Section 29 Tow	mship 185 Range	31E , NMPM, Eddy	County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S Address (Give address to which appro	ved copy of this form is to be sent)	
	Texas-New Mexico Pi	peline	P. O. Box 1510-Midlan Address (Give address to which appro		
	Nome of Authorized Transporter of Cas Phillips Petroleum		4001 Penbrook-Odessa,		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge. E 29 188 31E		<sup>en</sup> 6–20–78	
	give location of tanks. If this production is commingled wit	<u></u>	yes	0-20-78	
IV.	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Piug Back Same Res'v. Difl. Ros'v.	
	Designate Type of Completio	n = (X)			
	Date Spudied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V.	TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be a	1 fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
•••	Date First New Cil Run To Tonks Date of Teat     Date First New Cil Run To Tonks Date of Teat     Producing Method (Flow, pump, gas lift, etc.)				
			Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure	Castuâ Liespare		
	Actual Pred, During Test	Cil-Bbis.	Water-Bbls.	Gas + MCF	
	l	<u> </u>	1	Postes 318 Varia	
	GAS WELL	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
			Casing Freesure (Shut-in)	Cheke Size	
	Testing Mothod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Blidt-111)		
VI. CERTIFICATE OF COMPLIANCE		CE		ATION COMMISSION	
	I hereby certify that the rules and r	eculations of the Oil Conservation	APPROVED JAN 1 7 1980 19		
	Commitsion have been complied w above is true and complete to the	with and that the information given	BY W. a. Gressel		
			TITLE SUPERVISOR, DISTRICT 1		
			This form is to be filed in compliance with RULE 1104.		
	C. Harvey Can		If this is a request for allowable for a newly drilled or despense 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 allow- able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner.		
	District Engineer				
	(14)	le)			
	1 15 00	A REAL PROPERTY AND A REAL	H CHI GUCCOM DECLOUR H	ter or other such change of condition.	

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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 Forme C-104 must be filed for each pool in multiply conditied wills.