

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

RECEIVED

JUL 19 1982

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS O. C. D.

ARTESIA, OFFICE

|                        |               |
|------------------------|---------------|
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| U.S.O.S.               |               |
| LAND OFFICE            |               |
| TRANSPORTER            | OIL 1         |
|                        | NATURAL GAS 1 |
| OPERATOR               | 1             |
| PRODUCTION OFFICE      | 1             |

Operator

Southland Royalty Company ✓

Address

21 Desta Drive, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☒Dry Gas ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

Also changing operator's address

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                                                                                     |               |                                                         |                                              |                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------|----------------------------------------------|---------------------|
| Lease Name<br>State "16" Com.                                                                                                                                                                                       | Well No.<br>1 | Pool Name, Including Formation<br>Turkey Track (Morrow) | Kind of Lease<br>State, Federal or Fee State | Lease No.<br>L-2473 |
| Location<br>Unit Letter <u>F</u> <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u><br>Line of Section <u>16</u> Township <u>19S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County |               |                                                         |                                              |                     |

Enron Oil Trading &amp; Transportation Co.

P. O. Box 1188

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                          |                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| <del>Tesoro Crude Oil Company</del>                                                                                      | <del>8700 Tesoro Dr., San Antonio, Texas 78286</del>                     |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| El Paso Natural Gas Co.                                                                                                  | P. O. Box 1492, El Paso, Texas 79978                                     |
| If well produces oil or liquids,<br>give location of tanks.                                                              | Unit Sec. Twp. Rge.<br><u>F</u> <u>16</u> <u>19S</u> <u>29E</u>          |
|                                                                                                                          | Is gas actually connected? When<br><u>Yes</u> <u>2-14-79</u>             |

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

## COMPLETION DATA

|                                    |                             |          |                 |          |        |                   |              |               |
|------------------------------------|-----------------------------|----------|-----------------|----------|--------|-------------------|--------------|---------------|
| Designate Type of Completion - (X) | Oil Well                    | Gas well | New Well        | Workover | Deepen | Plug Back         | Same Res'ty. | Diff. Res'ty. |
| Date Spudded                       | 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 |
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |

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         | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (flow, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |

## 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.

F.N. RAD by E. Roberts  
(Signature)

District Operations Engineer

7/14/82

(Date)

## OIL CONSERVATION DIVISION

APPROVED JUL 20 1982, 19

BY John Walker  
TITLE OIL AND GAS INSPECTOR

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 deviated 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 Form C-104 must be filed for each pool in multiple