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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-55

RECEIVED

MAR 70 1980

Operator Southland Royalty Company		O. C. D. ARTESIA, OFFICE	
Address 1100 Wall Towers West, Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change In Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 14-A Comm.	Well No. 1	Pool Name, including Formation Undesignated (Turkey Track)	Kind of Lease State, Federal or Fee	Lease No. L-6420
Location Unit Letter <u>G</u> : <u>1325</u> Feet From The <u>north</u> Line and <u>2303</u> Feet From The <u>east</u>				
Line of Section <u>14</u> Township <u>19S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Basin, Inc.	Address (Give address to which approved copy of this form is to be sent) 511 W. Ohio, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 14
	Twp. 19	Rge. 29
	Is gas actually connected? <u>No</u> / <u>Yes</u>	
	When <u>1st order 11-26-80</u> <u>3-11-80</u>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 10-24-79	Date Compl. Ready to Prod. 1-9-80		Total Depth 11,725'			P.B.T.D. 11,405'		
Elevations (DF, RKB, RT, GR, etc.) 3357' GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 10,850' 10944			Tubing Depth 11,380'		
Perforations 10,944-11,376'						Depth Casing Shoe 11,725'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		1350'		1400			
11"	8 5/8"		2900'		1850			
7 7/8"	4 1/2"		11,725'		1450			

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)

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 420	Length of Test 24 hr.	Bbls. Condensate/MMCF 10	Gravity of Condensate NA
Testing Method (pitot, back pr.) Bk. Pr.	Tubing Pressure (Shut-in) 3150	Casing Pressure (Shut-in) 0	Choke Size N.A.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

C. Harney Can
(Signature)

District Engineer
(Title)

3-7-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 9 1980
BY W. A. Gressett
TITLE SUPERVISOR, DISTRICT

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 deviation 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 Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED

OIL CONSERVATION DIVISION
P. O. DRAWER DD
ARTESIA, NM 88210

DEC 9 1980

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE November 25, 1980

This is to notify the Oil Conservation Division that connection for the purchase
of gas from the Southland Royalty Company /

OPERATOR

State 14-A Com. #1

Eddy

G 14-19S-29E

LEASE & WELL

COUNTY

UNIT S-T-R

Turkey Track Morrow

El Paso Natural Gas Co.

POOL

NAME OF PURCHASER

was made on March 11, 1980

29162

01

DATE

SITE CODE

SITE WELL NUMBER

El Paso Natural Gas Co.

PURCHASER

M. H. Hutchinson

REPRESENTATIVE

Assistant Chief Division Dispatcher

TITLE

MHM: bl

cc: Operator

Oil Conservation Division - Santa Fe, NM

H. B. Logan

M. E. McEuen

Proration

Measurement - Jal

E. L. Tabb

Earl Smith

File