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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

C/SR
LT
GT
DP

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator Southland Royalty Company	Well API No.
Address 21 Desta Dr., Midland, TX 79705	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Parkway "C" State Com.	Well No. 1	Pool Name, Including Formation Wildcat U/Penn	Kind of Lease State, Federal or Fee State	Lease No. L-1493
Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 15 Township 19 South Range 29 East , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Enron Oil Trading & Trans. <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2267, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Company <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 15	Twp. 19S	Rge. 29E	Is gas actually connected? Yes	When? 10-8-90

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 x	Gas Well	New Well	Workover	Deepen	Plug Back x	Same Res'v	Diff Res'v
Date Spudded 10/01/90 (PlugBack)	Date Compl. Ready to Prod. 10/10/90		Total Depth 10,850'		P.B.T.D. 10,260'			
Elevations (DF, RKB, RT, GR, etc.) 3339.1' GR.	Name of Producing Formation Penn Lime (Cisco-Canyon)		Top Oil/Gas Pay 9994'		Tubing Depth 9700'			
Perforations 9994'-10,092'; 9807'-9852'					Depth Casing Shoe 10,848'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	11-3/4"		225'		450 sx			
11"	8-5/8"		2750'		1000 sx			
7-7/8"	5-1/2"		10,848'		850 sx			
	2-7/8" (Tbg.)		9700'					

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.)

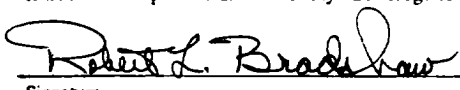
Date First New Oil Run To Tank 08 October 1990	Date of Test 13 October 1990	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 185	Casing Pressure -0-	Choke Size 28/64"
Actual Prod. During Test	Oil - Bbls. 251	Water - Bbls. 1	Gas - MCF 969

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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.


Signature
Robert L. Bradshaw
Printed Name
16 October 1990
Date
Env./Reg. Spec.
915-686-5678
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **OCT 30 1990**

By **ORIGINAL SIGNED BY**
MIKE WILLIAMS
Title **SUPERVISOR, DISTRICT II**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.