

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

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED

See Instructions
at Bottom of Page

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REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

Operator SOUTHWEST ROYALTIES, INC. ✓	Well API No. 30-015-21007
Address 407 N. Big Spring, Suite 300, Midland, Texas 79701	
Reason(s) for Filing (Check proper box) New Well ☐ Change in Transporter of: ☐ Other (Please explain) Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Operator ☒ Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator PHILLIPS PETROLEUM COMPANY, 4001 Penbrook Street, Odessa, Texas 79762	
Effective Date: September 1, 1990	

II. DESCRIPTION OF WELL AND LEASE

Lease Name WESTFALL-A "COM"	Well No. 1	Pool Name, Including Formation Carlsbad, South (Morrow)	Kind of Lease State, Federal or Fee XXX	Lease No. NM-0515150
Location Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line Section 5 Township 23S Range 27E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil PHILLIPS PETROLEUM COMPANY - Trucks	or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Company	or Dry Gas ☒	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 N Sec. 5 Twp. 23S Rge. 27E	Is gas actually connected? When?

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
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		

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	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 (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 L. M. Sanders
L. M. Sanders Supv., Regulation & Proration
Printed Name
Date 10/18/90 Title (915) 368-1488
Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____
By _____
Title _____
For Record Only

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

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