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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 1-1-65

Operator Southland Royalty Company	
Address P. O. Drawer 570, Farmington, New Mexico 87401	
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	

Lease Name Nye	Well No. 14-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Foreign Federal	Lease No. SF-078198
Location Unit Letter <u>G</u> ; <u>1580</u> Feet From The <u>North</u> Line and <u>1670</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>30N</u> Range <u>11W</u> , NMPM, <u>San Juan</u> County				

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)					
Plateau	4775 Ind. Sch. Rd, N.E., Albuquerque, NM 87110					
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)					
Southern Union Gathering	P.O. Box 1899, Bloomfield, N.M. 87413					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected?	When
					No	

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

V. 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 1-27-81	Date Compl. Ready to Prod. 4-7-81	Total Depth 7239'	P.B.T.D. 7073'					
Elevations (DF, RKB, RT, GR, etc.) 6091' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 7014'	Tubing Depth 7162'					
Perforations 7014'-7194'			Depth Casing Shoe 7216'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	10-3/4"	234'	189 sacks					
9-7/8"	7-5/8"	4835'	540 sacks (2 stages)					
	5-1/2"	4422'-6931'	**See Other Side**					
	4"	6805'-7216'	85 sacks					
	1-1/2"	7162'						

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
		MAY 13 1981	
		OIL CON. COM.	

GAS WELL			
Actual Prod. Test-MCF/D 1057	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1768	Casing Pressure (shut-in) ---	Choke Size 3/4"

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.	
<div>Signature: <u>[Signature]</u> District Production Manager (Title) May 12, 1981 (Date)</div>	
OIL CONSERVATION COMMISSION APPROVED <u>JUL 21 1981</u> Original Signed by FRANK T. CHAVEZ BY _____ TITLE <u>SUPERVISOR DISTRICT # 3</u> 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.	

CONTINUED FROM OTHER SIDE

5-1/2" Cement Liner Information:

Btm 6931', cemented with 75 sacks cement.

Perf'd 2 holes at 6520', cemented with 50 sacks of cement and
re-squeezed with 35 sacks cement.

At 5250', squeezed with 100 sacks cement and 150 sacks cement.

At 4902', squeezed with 100 sacks cement.