

DISTRIBUTION
SANITARY
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRORATION 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
Reason(s) for filing (Check proper box)
New Well ☒ Change In Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change In Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE
Lease Name Hubbard Well No. 1A Pool Name, Including Formation Blanco Mesa Verde Kind of Lease State, Federal or Fee SF-078312 Lease No.
Location Unit Letter I ; 1720 Feet From The South Line and 850 Feet From The East
Line of Section 22 Township 32N Range 12W , NMPM, San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc. P. O. Box 108, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Company P. O. Box 1899, Bloomfield, New Mexico
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
No

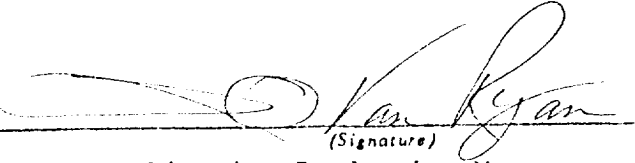
If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 5-3-78 Date Compl. Ready to Prod. 5-17-78 Total Depth 5388' P.B.T.D. 5293'
Elevations (DF, RKB, RT, GR, etc.) 6210' GR Name of Producing Formation Mesa Verde Top Oil/Gas Pay 4462' Tubing Depth 5165'
Perforations 4462-4906' Cliff House, 4992-5218' Point Lookout Depth Casing Shoe 5385'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 9-5/8" 224' 110 SXS
8-3/4" 7" 2974' 240 SXS
6-1/4" 4-1/2" 2809'-5385' 270 SXS
2-3/8" 5165'

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 14,521 Length of Test 3 hrs Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure Tubing Pressure (shut-in) 742 psig Casing Pressure (shut-in) 924 psig Choke Size 3/4"

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.

District Production Manager
June 6, 1978
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY Original Signature of _____
TITLE SUPERVISOR DIST. 5
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.