

LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROBATION OFFICE	

Operator  
Southland Royalty Company  
Address  
P. O. Drawer 570, Farmington, New Mexico  
Reason(s) for filing (check proper box)  
New Well ☐  
Recompletion ☒  
Change in Ownership ☐  
Change in Transporter of:  
Oil ☐  
Casinghead Gas ☐  
Dry Gas ☐  
Condensate ☐  
Other (Please explain)

DESCRIPTION OF WELL AND LEASE  
Name  
Pepper Martin  
Well No. 19 Pool Name, including Formation  
Aztec Pictured Cliffs  
Section 29 Township 32N Range 12W Feet From The North 790  
Kind of Lease FEE  
State, Federal or Fee East  
Lease No.  
County  
Union Gathering  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1899, Bloomfield, New Mexico 87413  
Is gas actually connected? No

DESCRIPTION OF TRANSPORTER OF OIL AND NATURAL GAS  
Authorized Transporter of Oil ☐  
or Condensate ☐  
or Casinghead Gas ☐  
or Dry Gas ☒  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1899, Bloomfield, New Mexico 87413  
Is gas actually connected? No  
When  
Date of Completion - (X)  
Oil Well ☐  
Gas Well ☒  
New Well ☒  
Workover ☐  
Deepen ☐  
Name of Producing Formation  
Pictured Cliffs  
Total Depth  
2550'  
Top Oil/Gas Pay  
2330'

TUBING, CASING, AND CEMENTING RECORD	Plug Back	Same Rest'y.	Diff. Rest'y.
CASING & TUBING SIZE	P.B.T.D.		
8-5/8"	2531'		
2-7/8"	---		
DEPTH SET	Tubing Depth		
179'	Depth Casing Shoe		
2539'	2539'		
SACKS CEMENT			
135 sacks			
750 sacks			

TEST FOR ALLOWABLE  
(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 of Test  
Tubing Pressure  
Oil-Bbls.  
Producing Method (Flow, pump, gas lift, etc.)  
Casing Pressure  
Water-Bbls.  
Shoke Size  
3/8"

APPROVED  
BY Original Signed by CHARLES GHOLSON  
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3  
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 allow-  
able on now 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  
completed wells.  
Separate Forms C-104 must be filed for -

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-1

Effective 1-1-65

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRORATION OFFICE

Operator

Southland Royalty Company

Address

P. O. Drawer 570, Farmington, New Mexico

Reason(s) for filing (Check proper box)

New Well

☒

Recompletion

☐

Change in Ownership

☐

Change in Transporter of:

Oil

☐

Casinghead Gas

☐

Dry Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name

Culpepper Martin

Well No.

19

Pool Name, including Formation

Aztec Pictured Cliffs

Kind of Lease

State, Federal or Fee

FEE

Lease No.

Location

Unit Letter

A

:

975

Feet From The

North

Line and

790

Feet From The

East

Line of Section

29

Township

32N

Range

12W

, NMFM,

San Juan

County

III. 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)

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

P.O. Box 1899, Bloomfield, New Mexico 87413

If well produces oil or liquids, give location of tanks.

Unit

Sec.

Twp.

Rge.

Is gas actually connected?

No

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

X

New Well

X

Workover

Deepen

Plug Back

Same Res'v.

Diff. Res'v.

Date Spudded

12-31-80

Date Compl. Ready to Prod.

6-15-81

Total Depth

2550'

P.B.T.D.

2531'

Elevations (DF, RAB, RT, GR, etc.)

5955' GR

Name of Producing Formation

Pictured Cliffs

Top Oil/Gas Pay

2330'

Tubing Depth

Perforations

2330' - 2348'

Depth Casing Shoe

2539'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

12-1/4"

CASING & TUBING SIZE

8-5/8"

DEPTH SET

179'

SACKS CEMENT

135 sacks

6-3/4"

2-7/8"

2539'

750 sacks

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

Shoke Size

Actual Prod. During Test

Oil-Bbls.

Water-Bbls.

Oil-MCF

GAS WELL

Actual Prod. Test-MCF/D

113 MCF/d

Length of Test

3 hours

Bbls. Condensate/MCF

Gravity of Condensate

Testing Method (pitot, back pr.)

Tubing Pressure (Shut-in)

Casing Pressure (Shut-in)

908

Shoke Size

3/8"

Back Pressure

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.

Signature

District Production Manager

July 23, 1981

(Date)

OIL CONSERVATION COMMISSION

JUL 29 1981

APPROVED

BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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