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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

I. Operator
Southland Royalty Company
Address
1405 Wilco Bldg., Midland, Texas 79701
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

II. DESCRIPTION OF WELL AND LEASE *Inbe-Permo Pennsylvanian*
Lease Name **Shell-State** Well No. **2** Pool Name, including Formation **Undesig. (Inbe-Permo Penn. Ext.)** Kind of Lease
State, Federal or Fee **State**
Location
Unit Letter **L** ; **1980** Feet From The **South** Line and **440** Feet From The **West**
Line of Section **19** , Township **11-S** Range **34-E** , NMPM, **Lea** 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)
Service Pipe Line Company Amoco Pipeline Co. **P.O. Box 1979, Tulsa, Oklahoma**
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Corp. **P.O. Box 966, Lovington, New Mexico**
If well produces oil or liquids, give location of tanks. Unit **E** Sec. **19** Twp. **11-S** Rge. **34-E** Is gas actually connected? **Yes** When **July 31, 1967**

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) **X** Oil Well **X** Gas Well **X** New Well **X** Workover **X** Deepen **X** Plug Back **X** Same Res'v. **X** Diff. Res'v. **X**
Date Spudded **8-30-67** Date Compl. Ready to Prod. **10-7-67** Total Depth **9970** P.B.T.D. **9940**
Pool **Undesig. (Inbe - Permo Penn. Ext.)** Name of Producing Formation **Bough "C"** Top Oil/Gas Pay **9876** Tubing Depth **9870**
Perforations **7876-74** **2-9WK** Depth Casing Shoe **9970**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
15" **11 3/4"** **357'** **450 sx.**
11" **8 5/8"** **3956'** **750 sx.**
7 7/8" **5 1/2"** **9970'** **500 sx.**

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 10-7-67	Date of Test 10-22-67	Producing Method (Flow, pump, gas lift, etc.) Pump: 2 1/2" x 1 3/4" x 1 3/4" Hyd.-Subsurface	
Length of Test 24	Tubing Pressure 50	Casing Pressure 0 - Packer	Choke Size Open
Actual Prod. During Test 314	Oil-Bbls. 195	Water-Bbls. 119	Gas-MCF 224.4

GAS WELL

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

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.

C.H. Can
(Signature)

District Engineer

(Title)

October 23, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

TITLE _____

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 Sections I, II, III, and VI only 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.