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DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104		
	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
FILE U.S.G.S.		AND NSPORT OIL AND NATURAL	GAS
LAND OFFICE			
TRANSPORTER OIL		e sul	19 5
GAS			•
OPERATOR			
I. PRORATION OFFICE			
Southland Royal	ty Company		
Address			
	, Midland, Texas 797	701 Other (Please explain)	
Reason(s) for filing (Check proper b	ox) Change in Transporter of:	Other (Flease explain)	
New Well X Recompletion	Oil Dry Ga	IS S	
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name and address of previous owner			
-	_		
II. DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, Including F	ormation Kind of L	ease Lease No.
Vada-State	4 United (Vac	da Penn. Restat) State, Fed	ieral cr Fee State K-5351
Location			
Unit Letter;;	1980 Feet From The South Lir	ne and <u>1980</u> Feet Fr	om TheEast
Line of Section 32	Township 9-5 Range	<u>34-e</u> , <u>NMPM</u> ,	Lea County
NT TREEDER ATTION OF THE ANGRO	RTER OF OIL AND NATURAL GA	15	
it the second Transporter of	All X or Condensate '	Address (Give dadress to writer of	pproved copy of this form is to be sent)
Service Pipe Li	ne Company Amoro Pipeline		ulsa, oklahoma 74102
Name of Authorized Transporter of	Casinghead Gas X. or Dry Gas	Address (Give dudiess to which de	, , , , , , , , , , , , , , , , , , ,
Warren Petroleu		P.O. BOX 1589, T	ulsa, Oklahoma 74102
If well produces oil or liquids,	Uni: Sec. Twp. Ege. F 32 9-S 34-E		June 1, 1968
give location of tanks.	ويصفحون والمستجر والمست		
If this production is commingled IV. COMPLETION DATA	with that from any other lease or pool,	give comminging other number.	
	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
Designate Type of Comple			P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	_
6-23-68	7-31-68 Name of Producing Formation	9915 Top Oli/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc 4261.0 GR	Bough "C"	9856	9850
Perforations		······································	Depth Casing Shoe
9856-66'			9915
		ID CEMENTING RECORD	SACKS CEMENT
HOLESIZE	CASING & TUBING SIZE	<u>DEPTH SET</u> 373	375 sx.
17"	11 3/4"	4030	650 sx.
<u> </u>	<u> </u>	9915	525 sx.
1 1/8	<u> </u>		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load	l oil and must be equal to or exceed top allou
OIL WELL	able for this a	lepth or be for full 24 hours) Producing Method (Flow, pump, g	
Date First New Oil Run To Tanks	1		
7-31-68	8-1-68 Tubing Pressure	Flow Casing Pressure	Choke Size
Length of Test	100	Pkr.	3/4"
24 hrs. Actual Prod. During Test		Water-Bbls.	Gas - MCF
942	422	520	553
i			
GAS WELL		Bols, Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Brit, Consolidato, Maior	!
Testing Mothed (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
.esting Method (phot, buck phy			
VI. CERTIFICATE OF COMPLE	ANCE	OIL CONSE	RVATION COMMISSION
VI. CERTIFICATE OF COMPEN			19
I hereby certify that the rules a	and regulations of the Oil Conservation	APPROVED	R
	ed with and that the information given the best of my knowledge and belief		Rungan
Fore 10 rate and southers to		TITLE	-
			d in compliance with RULE 1104.
C. H. Chu			attamable for a newly drilled or deepend
	(Signature)	i i i i farm much be CCC	ompanied by a tabulation of the deviation accordance with RULE 111.
District Engine	-	tests taken on the well in	m must be filled out completely for allow
	(Title)	li shie on new and recomplet	ed wells.
August 2, 1968		Fill out only Sections	I, II, III, and VI for changes of owne asporter, or other such change of conditio
	(Date)	well name or number, of that	must be filed for each pool in multipl

gust	2,	T200	
			(Date)

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. H