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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

I.

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Graham-State	Well No. 2	Pool Name, Including Formation North Bagley - ^{R-3988} Pennsylvanian	Kind of Lease State	Lease No. K-5212
Location Unit Letter P ; 660 Feet From The South Line and 660 Feet From The East Line of Section 3 Township 11-S Range 33-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Amoco Pipe Line Company	3411 Knoxville Ave., Lubbock, TX 79413			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Warren Petroleum Corporation	Box 966, Lovington, New Mexico 88260			
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 3	Twp. 11-S	Rge. 33-E
	Is gas actually connected?			When
	Yes			1966

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res ^u .	Diff. Res ^u .
Date Spudded 2-25-70	Date Compl. Ready to Prod. 5-28-70		Total Depth 10,300		P.B.T.D. 10,260			
Elevations (DF, RKB, RT, GR, etc.) 4267' RKB	Name of Producing Formation Permo Penn (Bough C)		Top Oil/Gas Pay 8812		Tubing Depth 8800			
Perforations 9451-9459, 9570-9576, 9579-9608 - UPPER Penn - JWR					Depth Casing Shoe 10,300			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	11 3/4"		331		300 sx			
11"	8 5/8"		3950		350 sx			
7 7/8"	5 1/2"		10,300		800 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 4-3-70	Date of Test 5-31-70	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size Open
Actual Prod. During Test 135	Oil-Bbls. 135	Water-Bbls. 50	Gas-MCF 297

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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)
6-1-70
(Date)

OIL CONSERVATION COMMISSION
JUN 4 1970
APPROVED _____, 19____
BY **J. J. [Signature]**
TITLE **SUPERVISOR DISTRICT 1**

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.

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JUN 3 1970

OIL CONSERVATION COM.
HOBBES, N. H.