

OCT 8 1982

REQUEST FOR ALLOWABLE
AND
ARTESIAN OFFICE
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.E.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator Southland Royalty Company	
Address 21 Desta Drive, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Converted to Producer	

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Robinson Unit Sec. 31 Tr. 3	Well No. 13	Pool Name, including Formation Maljamar (GB-SA)	Kind of Lease State, Federal or Fee State	Lease No. E-8233
Location Unit Letter <u>M</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>16S</u> Range <u>32E</u> , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit <u>M</u>	Sec. <u>31</u>
	Twp. <u>16S</u>	Rge. <u>32E</u>
	Is gas actually connected? <u>Yes</u> When <u>1-14-60</u>	

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 Reservoir ☐	Diff. Reservoir ☐
Date Spudded 9-3-59	Date Compl. Ready to Prod. 10-59		Total Depth 4019'		P.B.T.D. 3988'			
Elevations (DF, RKB, RT, GR, etc.) 4094' GR	Name of Producing Formation Grayburg-San Andres		Top Oil/Gas Pay 3802'		Tubing Depth 3938'			
Perforations 3802-3972' (OA)					Depth Casing Shoe -			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"		331'		250 SX.			
6 3/4"	4 1/2"		4019'		200 SX.			

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 oil allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 10-3-82	Date of Test 10-5-82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 4 BO	Oil-Bbls. 4 BO	Water-Bbls. 41 BW	Gas-MCF 20 MCF

GAS WELL

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

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

F.N. RAD by D. Roberts
(Signature)
District Operations Engineer
10-7-82
(Date)

OIL CONSERVATION DIVISION OCT 18 1982	
APPROVED	ORIGINAL SIGNED BY
BY	JERRY SEXTON
DISTRICT 1 SUPERVISOR	
TITLE	
This form is to be filed in compliance with RULE 110A.	
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated 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 multi-comparted wells.	

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O.C.D.
HOBBES OFFICE