

NAME OF WELL	
LOCATION	
DATE	
TIME	
WELL	
LAND OFFICE	
TRANSPORTER	
OPERATION	
REGISTRATION OFFICE	

P. O. BOX 2088
S TA FC, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Southland Royalty Company	
1100 Wall Towers West, Midland, Tx 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of: ☐
Perforation ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐ Effective 2-1-79

If change of ownership give name and address of previous owner: Shenandoah Oil Corp., 1500 Commerce Bldg., Ft. Worth, Tx 76102

I. DESCRIPTION OF WELL AND LEASE				
Lessee Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Malmar Unit Tr 1	1	Maljamar Grayburg San Andres	State, Federal or Fee	State B-2148
Location				
Well Letter	A	660 Feet From The North Line and	660 Feet From The East	
Line of Section	13	Township	17S	Range 32E, NMPL, Lea County

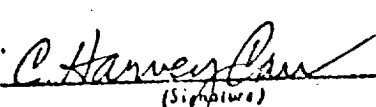
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipeline	P. O. Box 1510-Midland, Tx 79702					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	4001 Penbrook, Odessa, Tx 79762					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	13	17S	32E	Yes	Unknown

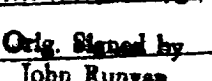
If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Excursions (DF, RAB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Formations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

VI. 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	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Dbls. Condensate/AMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-In)	Casing Pressure (Shot-In)	Choke Size

VII. 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.	
	
District Engineer	
(Title)	
3-1-79	
(Date)	

OIL CONSERVATION DIVISION	
APPROVED MAR 15 1979	
BY 	
John Runyan	
Geologist	
TITLE	
This form is to be filed in compliance with RULE 1-64.	
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 1-11.	
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 Form C-104 must be filed for each pool in multiple.	

RECEIVED

MAR 14 1979

CH. OF INFORMATION COMM.
BOSTON, MA 02101