

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

I.

Operator	Southland Royalty Company	621281
Address	21 Desta Drive, Midland, Texas 79705	
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 ☐

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Federal "21" Com	1	South Corbin (Bone Spring)	State, Federal or Fee Federal NM-0997	
Location				
Unit Letter L	1980	Feet From The South	Line and 660	Feet From The West
Line of Section 21	Township 18S	Range 33E	NMFM, 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)					
Koch Oil Company	P. O. Box 1558, Breckenridge, Texas 76024					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	L	21	18S	33E	No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Diff. Res.
XX						XX		
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-5-87	6-12-87		13,646'		10,965'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3830' GR	Bone Spring		8716'		8699'			
Perforations					Depth Casing Shoe			
8716-64' Bone Spring					-			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		396'		400 sx.			
11"	8 5/8"		5110'		1650 sx.			
7 7/8"	5 1/2"		13,620'		1145 sx.			
	2 3/8"		8699'					

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top oil
OIL WELL able 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.)	
6-12-87	6-28-87	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	-	-	-
Actual Prod. During Test	Oil-bbls.	Water-bbls.	Gas-MCF
23 BO	23	40	-

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

VI. CERTIFICATE OF COMPLIANCE

ILLEGIBLE

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

Operations Tech III

7/1/87

(Date)

OIL CONSERVATION DIVISION

JUL 14 1987

BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISORThis 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 deviate
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allo-
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own-
well name or number, or transporter or other such change of condi-
tion. Form C-104 must be filed for each pool in multi-