

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.G.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATOR	
REGISTRATION OFFICE	

Operator Southland Royalty Company	
Address 21 Desta Drive, Midland, Texas 79705	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Request permission to move 1000 bbls of test oil.
Recompletion ☐	
Change in Ownership ☐	
Change in Transporter of:	
Oil ☐	Dry Gas ☐
Casinghead Gas ☐	Condensate ☐

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Aztec "22" Federal	Well No. 1	Pool Name, including Formation Corbin S. (Morrow)	Kind of Lease xxxxx Federal xxxxx	Lease No. NM-0997
Location				
Unit Letter F	: 1980	Feet From The North	Line and 1980	Feet From The West
Line of Section 22	Township 18S	Range 33E	Neighb. Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 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)				
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 22	Twp. 18S	Rge. 33E	Is gas actually connected? When

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	Some Other	Other
Date Spudded	Date Compl. Ready to Prod.		Total Depth		F.B.T.D.			
Elevations (OF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing		Choke Size
Actual Prod. During Test	Oil-Bbl		Gas-MCF

ILLEGIBLE

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Barbara Carter Roland
(Signature)
Production Analyst
(Title)
Sept. 9, 1985
(Date)

OIL CONSERVATION DIVISION	
APPROVED	SEP 11 1985
BY	Eddie W. Sney
TITLE	Oil & Gas Division

This form is to be filed in compliance with RULE 111.4.
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 all wells 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 completions.