

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

I. OPERATOR

Southland Royalty Company

Address

21 Desta Drive, Midland, Texas 79705

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☐

WARNING: CASINGHEAD GAS MUST NOT BE FLARED AFTER 9/11/85 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.

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.
Peoples "33" State	1	Scharb (Wolfcamp)	State, Federal or Fee State	LG-96
Location				
Unit Letter L	660	Feet From The West	Line and 1980	Feet From The South
Line of Section 33	Township 18S	Range 35E	N.M.P.M.	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)	
The Permian Corp.	P. O. Box 3119, Midland, Texas 79702	
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)	
Unknown at this time		
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	L	33
		18S
		35E
Is gas actually connected?	When	
No	Unknown	

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 as Prev. Well
	XX		XX				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
5-23-85	7-11-85	11,232'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
3911.4' GR	Wolfcamp	11,068.5'	10,995'				
Perforations	TUBING, CASING, AND CEMENTING RECORD			Depth Casing Shoe			
11,068.5-86.5'							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
17 1/2"	13 3/8"	415'	420				
12 1/4"	8 5/8"	3900'	1400				
7 7/8"	5 1/2"	11,230'	200				
	2 7/8"	10,995'					

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 oil 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.)	
7-11-85	7-11-85	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	150		32/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
357	357	0	330

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.

John Stark  
(Signature)  
Operations Engineer

7/12/85

(Date)

(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 12 \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all 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 condit  
Separate Form C-104 must be filed for each pool in mult completed wells.

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JUL 15 1985

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