

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

NO. OF COPIES DESIRED	
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SANTA FE	
FILE	
U.S.G.	
OTHER OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATOR	
PAIDRATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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 ☐

Other (Please explain)

If change of ownership give name
and address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
State "16"	2	S. Corbin (Wolfcamp)	State, Federal or Fee	State LG-4087
Location				
Unit Letter	N	660	Feet From The	South
Line and	1980	Feet From The	West	
Line of Section	16	Township	18S	Range
			33E	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)					
Texas-New Mexico Pipeline	Box 60028, San Angelo, Texas 76906					
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)					
Conoco	P. O. Box 2197, Houston, Tx 77001					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	16	18S	33E	Yes	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 Well	Other
XX			XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
4-16-88	7-9-88	13,651'	13,640'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3874' GR	Wolfcamp	11,400'	11,315'					
Perforations	Depth Casing Shoe							
11,400-434'	-							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	350'	370 sx.
12 1/4"	9 5/8"	2910'	1085 sx.
7 7/8"	5 1/2"	13,640'	1940 sx.
	2 7/8"	11,315'	

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead oil and must be equal to or exceed top oil
OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7-9-88	7-10-88	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	90	-	30/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
344 BO	344	0	180

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

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.

Cathy Jones
(Signature)
Operations Tech III
(Title)
7/12/88
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 10 _____

BY _____

TITLE _____

This form is to be filed in compliance with RULE 104.

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 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 condition.
Form C-104 must be filed for each pool in multi-