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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico iergy, Minerals and Natural Resources Depart

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I.

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

	Operator						Well API No.				
Southland Royalty Company					30-025-30576						
Address								-			
21 Desta Dr., Midland, TX	79705										
Reason(s) for Filing (Check proper box)				Oth	er (Piease expla	zin)					
New Well		Change in	Transporter of:								
Recompletion	Oil		Dry Gas								
Change in Operator	Casinghea	id Gas 🔲	Condensate								
If change of operator give name											
and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASE	<del> </del>			<del></del>		r			
Lease Name		Well No.	Pool Name, Include				of Lease Trainal or Fee	NM-09	se No.		
West Corbin Federal		14	South Corbin	(Wolfcan	np)	321	Train of Tee	INM-03	<del>3</del> 1		
Location											
Unit Letter G	1980		Feet From The No	orth Lie	e and	Fe	et From The Ea	st	Line		
	40.5		00 5				1		_		
Section 17 Township	p 18 S	South	Range 33 Eas	t , N	MPM,		Lea		County		
	on on mr	n on o		DAT CAC							
III. DESIGNATION OF TRAN	SPORTE	or Conder		Address (Giv	e address to wh	ich appraved	copy of this form	is to be sen	()		
Name of Authorized Transporter of Oil Texas-New Mexico Pipeline	Addition (O)		-	lobbs, NM 8		,					
ļ		×	or Dry Gas	Address (Giv		<del></del>	<del></del>		()		
Name of Authorized Transporter of Casing Conoco		لـكـا	01 Diy 048	Address (Give address to which approved copy of this form is to be sent)  P.O. Box 2197, Houston, TX 77252							
If well produces oil or liquids,	Unit	Sec.	Twp. Rge.	is gas actuall		When					
give location of tanks.	0	8	18-S   33-E	1	Yes	i					
If this production is commingled with that i	from any oth	er lease or	pool, give comming	ing order num	per:		Not Applica	ble			
IV. COMPLETION DATA	,		, , , , ,	Ü							
		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v		
Designate Type of Completion	- (X)	×	j	×		L	1 1_				
Date Spudded	Date Comp	ol. Ready to	Prod.	Total Depth			P.B.T.D.	-			
12/05/89		2/02	/90		11,500'			11,440'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	roducing Fo	ormation	Top Oil/Gas	Pay		Tubing Depth				
3880' GR.	amp	10,718'			11,005'						
Perforations							Depth Casing S				
			11,350'				<u> </u>	11,499'			
			CASING AND	CEMENTI		D					
HOLE SIZE	CAS		IBING SIZE	ļ	DEPTH SET		SACKS CEMENT				
17 1/2"	<u> </u>	13 3/8"		370'			370 sxCirculated				
12 1/4"		8 5/			2887'		1300 sxCirculated 2075 sxTOC 2920' (CBL				
7 7/8"	ļ	5 1/			11,500'		2073 33-	100 232	O (CBL)		
U TECT DATA AND REQUES	TEODA	2 7/8'			11,005'		<u>:</u>				
V. TEST DATA AND REQUES	IFUKA	And waterman	ADLE						)		
	he equal to or	exceed top allo	wable for this	denth or he for	full 24 hours	t be equal to or exceed top allowable for this depth or be for full 24 hours.)    Producing Method (Flow, pump, gas lift, etc.)					
Data Cine Many Oil Due To Teek	Date of Tax		oj toda ou ana must	be equal to or	exceed top allo	wable for this	depth or be for ;	full 24 hours			
Date First New Oil Run To Tank	Date of Tes	st.		be equal to or Producing Me	exceed top allo thod (Flow, pw	mp, gas lift, e	s depth or be for ; ic.)	full 24 hours			
2/03/90	<u> </u>	1 2/06/9		Producing Me	thod (Flow, pur	mable for this mp, gas lift, e Flowing	s depth or be for , ic.)  Choke Size	full 24 hours			
2/03/90 Length of Test	Date of Tes	si 2/06/9 ssure		Producing Me Casing Pressu	thod (Flow, pur	mp, gas lift, e	Choke Size	full 24 hours 32/64"			
2/03/90 Length of Test 24 hrs.	Tubing Pre	1 2/06/9		Producing Me	thod (Flow, pur	mp, gas lift, e	Choke Size				
2/03/90 Length of Test	<u> </u>	si 2/06/9 ssure		Producing Me	thod (Flow, pur	mp, gas lift, e	Choke Size				
2/03/90 Length of Test 24 hrs. Actual Prod. During Test	Tubing Pre	2/06/9 ssure 130		Producing Me	ethod (Flow, pur re O	mp, gas lift, e	Choke Size	32/64"			
2/03/90 Length of Test 24 hrs. Actual Prod. During Test  GAS WELL	Tubing Pres	2/06/9 ssure 130 359		Producing Me   Casing Pressu   Water - Bbls	re 0	mp, gas lift, e	Choke Size  Gas- MCF	32/64"			
2/03/90 Length of Test 24 hrs. Actual Prod. During Test	Tubing Pre	2/06/9 ssure 130 359		Producing Me	re 0	mp, gas lift, e	Choke Size	32/64"			
2/03/90 Length of Test 24 hrs. Actual Prod. During Test  GAS WELL Actual Prod. Test - MCF/D	Oil - Bbls.	2/06/9 ssure 130 359	0	Producing Me Casing Pressu Water - Bbls. Bbls. Conden	re 0 100 sate/MMCF	mp, gas lift, e	Choke Size  Gas- MCF  Gravity of Cond	32/64"			
2/03/90 Length of Test 24 hrs. Actual Prod. During Test  GAS WELL	Tubing Pres	2/06/9 ssure 130 359	0	Producing Me   Casing Pressu   Water - Bbls	re 0 100 sate/MMCF	mp, gas lift, e	Choke Size  Gas- MCF	32/64"			
2/03/90  Length of Test 24 hrs.  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (puot. back pr.)	Oil - Bbls.	2/06/9 551/7 130 359  [est	in)	Producing Me Casing Pressu Water - Bbls. Bbls. Conden	re 0 100 sate/MMCF	mp, gas lift, e	Choke Size  Gas- MCF  Gravity of Cond	32/64"			
2/03/90 Length of Test 24 hrs. Actual Prod. During Test  GAS WELL Actual Prod. Test - MCF/D	Oil - Bbls.	2/06/9 2/06/9 359  [est	in)	Producing Me Casing Pressu Water - Bbls. Bbls. Conden Casing Pressu	re 0 100 sate/MMCF re (Shut-in)	mp, gas lýt, e Flowing	Choke Size  Gas-MCF  Gravity of Cond  Choke Size	32/64" 300 densate			
2/03/90  Length of Test 24 hrs.  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (puot, back pr.)  VI. OPERATOR CERTIFICA  I hereby certify that the rules and regula	Oil - Bbls.    Length of     Tubing Presentations of the length of	2/06/9 ssure 130 359 Test ssure (Shut	in)  LIANCE	Producing Me Casing Pressu Water - Bbls. Bbls. Conden Casing Pressu	re 0 100 sate/MMCF re (Shut-in)	SERV	Choke Size  Gas-MCF  Gravity of Cond Choke Size	32/64" 300 Sensale			
2/03/90  Length of Test 24 hrs.  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (puot. back pr.)  VI. OPERATOR CERTIFICA  I hereby certify that the rules and regula  Division have been complied with and the	Oil - Bbls.    Length of Tabling Pres   Tubing Pres   ATE OF tions of the shat the information of the shat the information of the shat the information of the shat th	2/06/9 ssure 130 359 Test  COMP Oil Conservation give	in)  LIANCE	Producing Me Casing Pressu Water - Bbls. Bbls. Conden Casing Pressu	re 0 100 sate/MMCF re (Shut-in)	SERV	Choke Size  Gas-MCF  Gravity of Cond  Choke Size	32/64" 300 Sensale			
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2/03/90  Length of Test 24 hrs.  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (puot. back pr.)  VI. OPERATOR CERTIFICA  I hereby certify that the rules and regula Division have been complied with and the structure and complete to the best of my to signature  Robert L. Bradshaw	Oil - Bbls.  Length of Tubing Presentations of the that the information of the control of the co	2/06/9 ssure 130 359 Test ssure (Shute COMP Oil Consentation give ad belief. Env./R 915/6	in)  LIANCE ration in above  eg. Spec. Title 186-5678	Producing Me Casing Pressu Water - Bbls.  Bbls. Conden Casing Pressu  Date	re 0 100 sate/MMCF re (Shut-in)  OIL CON Approved	SERVA	Choke Size  Gas-MCF  Gravity of Cond  Choke Size  ATION DI  D BY JERRY  SUPERVISO	32/64"  300  Sensate  VISION  SEXTON			
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.