

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

Operator Southland Royalty Company	Well API No. 30-025-30787
Address 21 Desta Dr., Midland, TX 79705	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Huber "17" Federal	Well No. 4	Pool Name, Including Formation South Corbin (Wolfcamp)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-26692
Location Unit Letter <u>O</u> : <u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>17</u> Township <u>18 South</u> Range <u>33 East</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Texas-New Mexico Pipeline <input checked="" type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79702				
Name of Authorized Transporter of Casinghead Gas Phillips 66 Nat. Gas Co. <input checked="" type="checkbox"/>	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762				
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 17	Twp. 18S	Rge. 33E	Is gas actually connected? Yes	When ?
If this production is commingled with that from any other lease or pool, give commingling order number:						PC-771

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well x	Gas Well	New Well x	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 1/27/90	Date Compl. Ready to Prod. 3/15/90		Total Depth 11,500'		P.B.T.D. 11,442'			
Elevations (DF, RKB, RT, GR, etc.) 3854' GR.	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 10,764'		Tubing Depth 11,017'			
Perforations 10,772'-11,382'					Depth Casing Shoe 11,500'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		348'		370 sx-Circulated			
12 1/4"	8 5/8"		2,905'		1450 sx-Circulated			
7 7/8"	5 1/2"		11,500'		1st-630 sx--DV @8011'			
					2nd-100 sx--TOC 1050'			

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 Tank 3/18/90	Date of Test 4/21/90	Producing Method (Flow, pump, gas lift, etc.) Pump: 2 1/2" x 1 1/4" x 36' RHBM	
Length of Test 24 Hours	Tubing Pressure On pump	Casing Pressure	Choke Size 20/64"
Actual Prod. During Test	Oil - Bbls. 15	Water - Bbls. 10	Gas - MCF 65

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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.

Robert L. Bradshaw
Signature
R. L. Bradshaw
Printed Name
30 April 1990
Date
Env./Reg.Spec.
Title
915-686-5678
Telephone No.

OIL CONSERVATION DIVISION

MAY 3 1990

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title

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.