Submit 5 Copies
Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico y, Minerals and Natural Resources Departmer

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

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., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator 30-025-30810 Southland Royalty Company Address 21 Desta Dr., Midland, TX 79705 Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: X New Well 🔲 Dry Gas 🗀 Oil Recompletion Condensate Casinghead Gas Change in Operator (42.13uc) 1.05 If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Well No. | Pool Name, Including Formation State, Federal or Fee Federal Lease Name NM-93 West Corbin (Delaware) West Corbin Federal Location Feet From The North Line and 330 Feet From The West . 500 Unit Letter D County 18 South Range 33 East , NMPM, 18 Township Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Tx-New Mexico Pipeline Co. Name of Authorized Transporter of Casinghead Gas
Phillips 66 Nat. Gas Co. EFFECT VE. pr Dry Gas [February | Gas Corpor is gas actually connected? When? Twp. Rge. If well produces oil or liquids, Unit 06 May 1990 185 33E Yes 18 give location of tanks. G If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Deepen | Plug Back | Same Res'v Diff Res'v New Well Workover Gas Well Oil Well Designate Type of Completion - (X) | X X Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded 5456' 5500 4/29/90 4/01/90 Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 4857 4910' 3855' GR. West Corbin (Delaware) Depth Casing Shoe Perforations 5500' 4912-18', 4962-70', 4990-5014' 2 JSPF (82 Holes) TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE **DEPTH SET** HOLE SIZE 340 sx--Circulated 415' 8 5/8" 12 1/4" 1255 sx--Circulated 5500 5 1/2" 7 7/8" 4857 2 7/8" Tbg. V. TEST DATA AND REQUEST FOR ALLOWABLE (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.) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Pump: 2 1/2" x 1 1/2" x 24' RHBM 5/05/0-5/03/90 Choke Size Casing Pressure Tubing Pressure Length of Test -0--0-24 Hours Gas- MCF Water - Bbls Oil - Bbls. Actual Prod. During Test 50 31 128 **GAS WELL** Gravity of Condensate Bbis. Condensate/MMCF Length of Test Actual Prod. Test - MCF/D Choke Size Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Testing Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation MAY 1 0 1990 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved Lelitto Orig. Signed by Paul Kautz By_ Signature Robert L. Bradshaw Env./Reg.Spec. Geologist Printed Name 07 May 1990 Title Title_ 915-686-5678

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 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.

Telephone No.

- 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.