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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

State of New Mexico _nergy, Minerals and Natural Resources Depar

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS T. Well API No. Operator 30-025-31065 Southland Royalty Company Address 21 Desta Dr., Midland, TX 79705 Other (Please explain) Reason(s) for Filing (Check proper box) X Change in Transporter of: New Well Dry Gas Recompletion Oil Change in Operator Condensate Casinghead Gas If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Kind of Lease Lease No. Well No. | Pool Name, Including Formation Lease Name State, Federal or Fee Federal LC-069420 South Corbin (Wolfcamp) 25 West Corbin Federal Location Feet From The South Line and 695 _ Feet From The West 510 Unit Letter M Line 07 18 South Range 33 East Lea County Section Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil P. O. Box 2528, Hobbs, NM 88240 Texas-New Mexico Pipeline Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) X or Dry Gas 4001 Penbrook, Odessa, Tx 79762 Phillips 66 Natural Gas Co. When? 2-27-91 Rge. Is gas actually connected? Twp. If well produces oil or liquids, Sec. 185 18 33E give location of tanks. Н Yes PC-776 approved 28 November 1990. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Designate Type of Completion - (X) X Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded 11,465 1/06/91 2/26/91 11,510' Top Oil/Gas Pay Name of Producing Formation Tubing Depth Elevations (DF, RKB, RT, GR, etc.) 11,010' 3866' GR. South Corbin (Wolfcamp) 10.826' Depth Casing Shoe 11,510' 11,260-11,398'; 11,152'-11,242'; 11,098'-11,120'; 10,826'-10,876' TUBING, CASING AND CEMENTING RECORD CASING & TUBING SIZE **DEPTH SET** SACKS CEMENT HOLE SIZE 400 sx-Circulated 386' 13-3/8" 17-1/2" 2930' 1400 sx-Circulated 8-5/8" 12-1/4" 5-1/2" 11,510 1980 sx-Circ. D.V. 7-7/8" 2-7/8" (Tbg.) 11,010' 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 Flowing 2/28/91 2/27/91 Choke Size Casing Pressure Length of Test Tubing Pressure 32/64" 350 120 24 hrs. Gas- MCF Water - Bbls Actual Prod. During Test 400 35 **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Length of Test Achial Prod. Test - MCF/D Casing Pressure (Shut-in) Choke Size Testing Method (pilot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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. Date Approved __ Signature Robert L. Bradshaw Lati Env./Reg. Spec. Grandin

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

Printed Name

Date

01 March 1991

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title_

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

915-686-5678

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.