

OIL CONSERVATION DIVISION

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

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

Operator Southland Royalty Company	Well API No. 30-025-31278
Address P.O. Box 51810, Midland, TX 79710-1810	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Aztec "22" Federal	Well No. 2	Pool Name, including Formation South Corbin (Wolfcamp)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-0997
Location Unit Letter D : 660' Feet From The North Line and 660' Feet From The West Line Section 22 Township 18 South Range 33 East, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Permian Corporation	<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 1183, Houston, Texas 77251-1183
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit D Sec. 22 Twp. 18S Rge. 33E	Is gas actually connected? No When ?

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 7/2/91	Date Compl. Ready to Prod. 8/10/91	Total Depth 11,430		P.B.T.D. 11,370				
Elevations (DF, RKB, RT, GR, etc.) 3862.2 GR	Name of Producing Formation South Corbin (Wolfcamp)		Top Oil/Gas Pay 11,252		Tubing Depth 11,149			
Perforations 11,252 - 11,304, 4 spf, 212 holes					Depth Casing Shoe SN @ 11,150'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		450'		475 sx CI C 2% CaCl circ			
					140 sx to surface			
12-1/4"	8-5/8"		2900'		1000 sx C, tail w/250 sx C			
7-7/8"	5-1/2"		11,430		540 w/275 tail; 1000 sx			

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 8/10/91	Date of Test 8/12/91	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 18 hrs / 24	Tubing Pressure 260	Casing Pressure 0	Choke Size 24/64
Actual Prod. During Test	Oil - Bbls. 343 / 457.44	Water - Bbls. 19	Gas - MCF 480

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. 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.

Signature
Connie L. Malik
Reg Compliance R
Printed Name
August 15, 1991
Date
Telephone No.
915-686-5681

OIL CONSERVATION DIVISION

Date Approved
By
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.