

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATION	
PRODUCTION OFFICE	
Operator	

Southland Royalty Company

Address
21 Desta Drive, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:
Oil ☒ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Effective 4-1-83
Change Oil Transporter

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name State "VE"	Well No. 1	Pool Name, Including Formation Vacuum (G-SA)	Kind of Lease State, Federal or Fee State	Lease No. E-5221
Location Unit Letter <u>P</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>31</u> To Township <u>17S</u> Range <u>36E</u> , NMPM, <u>Lea</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1558, Breckenridge, Texas 76024					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 31	Twp. 17S	Rge. 36E	Is gas actually connected? Yes	When 9-4-61

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resist.	Diff. Resist.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

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)

Production Analyst
(Title)

March 8, 1983
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 15 1983, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

TITLE _____
This form is to be filed in compliance with RULE 1.01.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 1.11.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple completed wells.