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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Southland Royalty Company	
Address 1100 Wall Towers West, Midland, TX 79701	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 3	Pool Name, including Formation Tubb	Kind of Lease State, Federal or Fee State	Lease No. B-11613
Location Unit Letter M : 3175 Feet From The south Line and 660 Feet From The west				
Line of Section 2 Township 21-S Range 37-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Getty Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1231, Midland, TX 79702					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 2	Twp. 21-S	Rge. 37-E	Is gas actually connected? Yes	When

If this production is commingled with that from any other lease or pool, give commingling order number: P-239

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Diff. Reservoir
				X				X
Date Spudded Workover - 1-9-78	Date Compl. Ready to Prod. 1-15-78		Total Depth 8083'		P.B.T.D. 6600'			
Elevations (DF, RKB, KT, GR, etc.) 3490' GR	Name of Producing Formation Tubb		Top Oil/Gas Pay 6343'		Tubing Depth 6520'			
Perforations 6343-6510'					Depth Casing Shoe 8010			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
NA	13 3/8"		240'		200			
NA	8 5/8"		3000		1800			
NA	5 1/2"		8010'		550			

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)

Date First New Oil Run To Tanks 1-12-78	Date of Test 1-15-78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 12	Oil-Bbls. 12	Water-Bbls. 2 BLW	Gas-MCF 90

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. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

C. Harvey Can
(Signature)

District Engineer

(Title)

February 9, 1978

(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 4 1978

BY

TITLE SUPERVISOR DISTRICT

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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.

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OIL CONSERVATION COMM.
MOBBS. N. M.