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DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

(Date)

	DISTRIBUTION	*				
	 	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104		
		REQUEST FOR ALLOWARIE		Supersedes Old C-104 and C-1		
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			Effective 1-1-65		
				GAS		
	LAND OFFICE					
	TRANSPORTER OIL GAS	_				
	OPERATOR					
I.	PRORATION OFFICE Operator					
	Southland Royalty (Company				
	1100 Wall Towers We Reason(s) for filing (Check proper be	79701				
	New Well	Change in Transporter of:	Other (Please explain)			
	Recompletion	Oil Dry G	as The	55 5		
	Change in Ownership		ensate rame change es	ffective 1-1-78		
	If change of ownership give name and address of previous owner	Aztec Oil & Gas Co.,	P.O. Box 837, Hobbs	S. New Mex. 88240		
I.	DESCRIPTION OF WELL AND	LEASE				
	Gutman	Well No. Pool Name, Including F				
	Location	2 Drinkard	State, Feder	al or Fee DHC-154		
	Unit LetterL;	1980 Feet From The South Lin	ne and 990 Feet From	The West		
	Line of Section 11 To	ownship 21-S Range	37-E , NMPM.	Lea County		
١.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of O	il \chi or Condensate 🗀	Address (Give address to which appro	oved copy of this form is to be sent)		
	Texas-New Mexico P	ipeline Co.	P.O. Box 1510, Mid	land, Texas 79701		
	Name of Authorized Transporter of C	asinghead Gas 🔀 💢 or Dry Gas 🦳	Address (Give address to which appro	· · · · · · · · · · · · · · · · · · ·		
	Getty Oil Co. If well produces oil or liquids,	Unit Sec. Twp. P.ge.	P.O. Box 1231, Mid	land, Texas /9/02		
	give location of tanks.	L 11 21-S 37-E	Yes	7-8-65		
	If this production is commingled w	ith that from any other lease or pool,				
	COMPLETION DATA					
	Designate Type of Completi	ion - (X) Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	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		
	D. C.			`		
	Perforations			Depth Casing Shoe		
TUBING, CASING, AND CEMENTING F			CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
				JAGKS GEMENT		
į						
•	TEST DATA AND REQUEST F		fter recovery of total volume of load oil oth or be for full 24 hours!	and must be equal to or exceed top allow-		
i	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft. etc.)		
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,		
1	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF		
1.			<u> </u>			
_	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
ŀ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
				0020 0.20		
,	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION		
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.		OIL CONSERVATION COMMISSION APPROVED				
					BY Crie Sign of the Jean Section	
		TITLE True 7 (1)				
			Ofting Odn (Signature) District Engineer		TITLE 1996	
	1	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.					
-		tle)	All sections of this form must able on new and recompleted we	st be filled out completely for allow- ils.		
	December 21 10'		· ·			

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 multiply