

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

Owner SOUTHLAND ROYALTY CO.		Lease MADERA RIDGE 27 STATE COM		Well No. 1
Section 27	Township 24 SOUTH	Range 33 EAST	County LEA	
Approximate Location of Well: 000 feet from the NORTH line and 1980 feet from the EAST line				
Ground Level Elev. 3022.4	Producing Formation Wolfcamp	Pool Johnson Ranch	Dedicated Acreage: 320 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Communitization

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

SOUTHLAND ROYALTY COMPANY LG 4558		SOUTHLAND ROYALTY COMPANY LG 4558	
POGO PROD		POGO PROD	
POGO PROD		POGO PROD	
POGO PROD		POGO PROD	
STATE		STATE	

660' 1980'

CINCO LTD. LG 6251

PROFESSIONAL ENGINEER
NO. 575
JOHN W. WEST

CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Darrell Roberts

Name

Darrell Roberts

Position

Operations Engineer

Company

Southland Royalty Company

Date

2/6/85

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

FEBRUARY 2, 1985

Registered Professional Engineer and/or Land Surveyor

John W. West

Certificate No JOHN W. WEST, 575

RONALD J. EIDSON, 3239

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600 6930 7260 7590 7920 8250 8580 8910 9240 9570 9900

RECEIVED
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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR

Southland Royalty Company

Address

21 Desta Drive, Midland, Texas 79705

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Madera Ridge "27" St Com Well No. 1 Pool Name, including Formation *Wildcat Johnson Ranch Atoka Gas* Kind of Lease State, Federal or Fee State LG-4558

Location

Unit Letter B 660 Feet From The North Line and 1980 Feet From The East

Line of Section 27 Township 24S Range 33E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ The Permian Corp. Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79702

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Southland Gathering Company Address (Give address to which approved copy of this form is to be sent) P. O. Box 1078, Jal New Mexico 88252

If well produces oil or liquids, give location of tanks. Unit B Sec. 27 Twp. 24S Rge. 33E Is gas actually connected? No When Unknown

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Hole	Chill. Res.
		XX	XX					
Date Spudded 2-28-85	Date Compl. Ready to Prod. 5-29-85	Total Depth 15,694'	P.B.T.D. 15,000'					
Elevations (DF, RAB, RT, GR, etc.) 3522.4' GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 14,878'	Tubing Depth 12,647'					
Perforations 14,878-96'	Depth Casing Shoe -							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	800'	850 SXS.
12 1/4"	9 5/8"	5055'	2150 SXS.
8 3/4"	7"	13,130'	1625 SXS.
	4 1/2"	12,710-15,694'	400 SXS.

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	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 4352	Length of Test 7 hrs	Bbls. Condensate/MMCF 5	Gravity of Condensate 48.3
Testing Method (prior, back pr.) Back pr.	Tubing Pressure (Shut-in) 5255	Casing Pressure (Shut-in) -	Choke Size 11/64"

I. 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.

Danell Roberts
(Signature)
Operations Engineer

6/20/85

(Date)

(Date)

OIL CONSERVATION DIVISION

AUG - 2 1985

APPROVED _____ 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 1101.

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

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multi-