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ARTESIA, OFFICESTATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTForm C-104
Revised 10-01-78
Format 06-01-83
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SANTA FE		✓
FILE		✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	✓
	GAS	✓
OPERATOR		✓
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator PHILLIPS PETROLEUM COMPANY ✓

Address 4001 Penbrook Odessa, Texas 79762

Reason(s) for filing (Check proper box) Other (Please explain)

<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Effective date 1-1-86

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Burch C Jed-</u>	Well No. <u>15</u>	Pool Name, including Formation <u>Grayburg-Jackson-SR-0-G-SA</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>LC028793</u>
Location				
Unit Letter <u>D</u>	<u>990</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u>			
Line of Section <u>23</u>	Township <u>17S</u>	Range <u>29E</u>	N.M.P.M.	Eddy 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"/> <u>Navajo Refining Company - Pipeline Division</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 159, Artesia, New Mexico 88210</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>G 23 17S 29E</u>	<u>YES June 27, 1968</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of
my knowledge and belief.

Ken Johnson Ken Johnson
(Signature)
Production Records Supervisor
(Title)
January 24, 1986
(Date)

OIL CONSERVATION DIVISION
MAR 7 1986

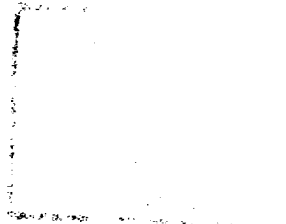
APPROVED _____, IS _____

BY _____ Original Signed By
Les A. Clements

TITLE _____ Supervisor District II

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 allow-
able 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 multiply
completed wells.



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