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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

RECEIVED

MAR 10 1992

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
OFFICE

Operator PHILLIPS PETROLEUM COMPANY	Well API No. 30-015-26646
Address 4001 Penbrook St., Odessa, Texas 79762	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 5/30/92
UNLESS AN EXCEPTION FROM
THE B. L. M. IS OBTAINED

II. DESCRIPTION OF WELL AND LEASE

Lease Name James E Fed	Well No. 14	Pool Name, Including Formation Cabin Lake (Delaware)	Kind of Lease State, Federal or Private	Lease No. NM 0479142
Location Unit Letter F : 1980' Feet From The North Line and 1980' Feet From The West Line Section 12 Township T-22-S Range R-30-E, NMPM, 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"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, TX 79762
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso 79999
If well produces oil or liquids, give location of tanks. Unit E Sec. 12 Twp. 22S Rge. 30E	Is gas actually connected? When? No (waiting on sales line)

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 11/22/91	Date Compl. Ready to Prod. 2/14/92	Total Depth 7720'	P.B.T.D. 7675'					
Elevations (DF, RKB, RT, GR, etc.) 3324' GL; 3335' KB	Name of Producing Formation Delaware	Top Oil/Gas Pay 7394'	Tubing Depth 7551' SN					
Perforations 7394', 7400', 7404', 7444', 7450', 7456', 7462', 7468', 7474', 7546', 7548', 7550', 7552', 7554', 7556', 7558', 7560', 7480', 7486', 7498', 7504', 7510'		Depth Casing Shoe 7720'						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	470'	800 sk C					
12-1/4"	8-5/8"	3700'	1800 sk C					
7-7/8"	5-1/2"	7720'	400 sk C 1st stage 200 sk C & 500 sk C Neat					

V. 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 Tank 2/15/92	Date of Test 3/4/92	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size comp + BK
Actual Prod. During Test	Oil - Bbls. 94	Water - Bbls. 299	Gas - MCF 139

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. OPERATOR 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
L. M. Sanders, Supervisor, Regulation & Proration
Printed Name
3/12/92 (915) 368-1667
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 26 1992
By ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.