

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

Energy, Minerals and Natural Resources Department

Revised 1-1-89  
 See Instructions  
 at Bottom of Page

**OIL CONSERVATION DIVISION**

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
 TO TRANSPORT OIL AND NATURAL GAS**

**I.**

Operator PHILLIPS PETROLEUM COMPANY	Well APN No. 3003907663
Address 5525 HWY 64 NBU 3004, FARMINGTON, NEW MEXICO 87401	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>

If change of operator give name and address of previous operator \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name San Juan 29-6 Unit	Well No. 30	Pool Name, including Formation Blanco Mesasverde	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>H</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>790.</u> Feet From The <u>East</u> Line				
Section <u>10</u>	Township <u>29N</u>	Range <u>6W</u>	<u>NMPM</u>	Rio Arriba County

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Meridian Oil Transporters, Inc.	Address (Give address to which approved copy of this form is to be sent) 3535 E. 30th. St., Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Williams Field Services Company	Address (Give address to which approved copy of this form is to be sent) PO Box 58900, Salt Lake City, UT 84158-0900
If well produces oil or liquids, give location of tanks.	Unit _____ Sec. _____ Twp. _____ Rgn. _____ Is gas actually connected? _____ When? Attn: Claire Potter

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 Res'v	Diff Res'v
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 Ray			Tubing Depth		
Perforations						Depth Casing Shoe		

**TIRING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, 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.

*L. E. Robinson*

Signature: L. E. Robinson Sr. Drlg. & Prod. Engr.  
 Printed Name: 5-30-91 Title: (505) 599-3412  
 Date: \_\_\_\_\_ Telephone No. \_\_\_\_\_

**OIL CONSERVATION DIVISION**

Date Approved JUN 04 1991

By [Signature]

Title DIVISION DISTRICT 23

- 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.



**LTR**



**Job separation sheet**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.

SF-078278

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

San Juan 29-6 Unit

8. Well Name and No.

SJ 29-6 Unit #30

9. API Well No.

30-039-07663

10. Field and Pool, or Exploratory Area

Blanco Mesaverde

11. County or Parish, State

Rio Arriba, NM

*SUBMIT IN TRIPLICATE*

1. Type of Well

Oil Well  Gas Well  Other

2. Name of Operator

Phillips Petroleum Company 505-599-3454

3. Address and Telephone No.

5525 Hwy. 64, NBU 3004, Farmington, NM 87401

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit H, 1650' FNL & 790' FEL  
Section 10, T29N, R6W

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Perforate &amp; produce</u>
	<u>Lewis Shale</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Set retrievable bridge plug above current Mesaverde perfs. Pressure test RBP & casing. RUN GR/CCL & CNL if needed. Perforate the Lewis Shale formation @ 1 spf w/120 degree phasing. Frac the Lewis Shale. Retrieve bridge plug. RIH w/2-3/8" production tubing w/gas lift mandrel and blast joints across Lewis perfs, 4-1/2" production packer and "R" profile nipple above the bottom joint of tubing and an expendable check valve on the end of the tubing. Using a slick line, remove blanking plug. Produce Lewis for a period of time to record daily volumes and pressures and then produce both zones.

RECEIVED  
MAR 13 1996  
BLM

14. I hereby certify that the foregoing is true and correct

Signed Ed Hasely Title Environmental/Regulatory Eng Date 3-4-96

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

**APPROVED**

MAR 07 1996

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

NMOCD

DISTRICT MANAGER

*Sharon A. Dyer*