

Appropriate District Office
DISTRICT I
P.O. Box 1900, Hobbs, NM 88240

Energy, Minerals and Natural Resources Department

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

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

OIL CONSERVATION DIVISION
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 API No. 3003923659
Address 5525 HWY 64 NBU 3004, FARMINGTON, NEW MEXICO 87401		
Reason(s) for Filing (Check proper box) ☐ New Well ☐ Recompletion ☐ Change in Operator ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☒ ☐ Other (Please explain)		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-5 Unit	Well No. 107	Pool Name, including Formation Gobernador PC	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>D</u> : <u>1040</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>West</u> Line Section <u>2</u> Township <u>29N</u> Range <u>5W</u> , <u>NMPM</u> , <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ 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 ☐ or Dry Gas ☒ Williams Field Services Company - ALK PC	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 <u> </u> Sec. <u> </u> Twp. <u> </u> Rge. <u> </u>	Is gas actually connected? <u> </u> 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			
TUBING, 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	Choke
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

RECEIVED
JUN 4 1991

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

OIL CON. DIV.
DIST. 3

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 (505) 599-3412
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 04 1991
By [Signature]
Title SUPERVISOR DISTRICT 3

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.