

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

DISTRICT
1000 E. Brazos Rd., Artesia, NM 87410

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator PHILLIPS PETROLEUM COMPANY	Well APN No. 30-039-24909
Address 5525 Hwy 64 NBU 3004, Farmington, NM 87401	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	

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. 223	Pool Name, Including Formation BASIN FRUITLAND COAL	Kind of Lease State/Federal/Private	Lease No. NM-011348
Location Unit Letter G : 1544 Feet From The North Line and 1397 Feet From The East Line Section 33 Township 29N Range 5W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> NONE	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> WILLIAMS FIELD SERVICES CO.	Address (Give address to which approved copy of this form is to be sent) P.O. 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
		X	X					
Date Spudded 10-21-90	Date Compl. Ready to Prod. Perf'd 1-7-92	Total Depth 3687'		P.B.T.D. 3656'				
Elevations (DF, RKB, RT, GR, etc.) 6719' GL	Name of Producing Formation Fruitland	Top Oil/Gas Pay 3442'		Tubing Depth 3594'				
Perforations 3442'-3541' and 3626'-3656'				Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12-1/4"	9-5/8", 36#, K-55	284.75'		250 Sx C1 B, Circ 114 Sx				
8-3/4"	5-1/2", 15.5#, J-55	3700.33'		40 Sx 65/25 Poz, 94 Sx C1B				
	8 3/8"	3574'		637 Sx 65/35 Poz, 60 Sx C1 F				
				Circ 15/110 Sx				

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	Cable Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
OIL CON. DIV. DIST. 3			

GAS WELL

Actual Prod. Test - MCF/D 983	Length of Test .1 hr.	Bbls. Condensate/MMCF No Test	Gravity of Condensate
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) 800	Casing Pressure (Shut-in) 800	Choke Size 2"

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
R.A. Allred
Printed Name
1-21-92
Date
Drilling Supervisor
(505) 599-3412
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 30 1992
By Original Signed by FRANK T. CHAVEZ
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.