

## OIL CONSERVATION DIVISION

DISTRICT II  
P.O. Drawer DD, Arleta, NM 88210P.O. Box 2088  
Santa Fe, New Mexico 87504-2088DISTRICT III  
1000 K. Brazos Rd., Aztec, NM 87410REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator PHILLIPS PETROLEUM COMPANY	Well API No. 30-039-25127
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:
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 type="checkbox"/>

If change of operator give name  
and address of previous operator

## II. DESCRIPTION OF WELL AND LEASE

Lease Name SAN JUAN 30-5 UNIT	Well No. 228	Pool Name, Including Formation BASIN FRUITLAND COAL	Kind of Lease State, Federal or Foreign	Lease No. SF-079739
Location				
Unit Letter L	: 1686	Feet From The South	Line and 911	Feet From The West
Section 28	Township 30N	Range 5W	County Rio Arriba	

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

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
NONE		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
WILLIAMS FIELD SERVICES CO.	P.O. BOX 58900, SALT LAKE CITY, UT 84158-0900	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
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 8-30-92	Date Compl. Ready to Prod. 9-27-92	Total Depth 3520'		P.B.T.D. 3519'				
Elevations (DF, RKB, RT, GR, etc.) 6722' GL	Name of Producing Formation Fruitland	Top Oil/Gas Pay 3410'		Tubing Depth 3500'				
Perforations 3410' - 3514'				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	288'	300 Sx C1 G, Circ 122 Sx
8-3/4"	7", 23#, J-55	3390'	400 Sx 65/35 Poz, 150 Sx
6-1/4"	5-1/2", 23#	3519'	C1 G, Circ 105 Sx
	2-3/8", 4.7#	3500'	

## 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.)	RECEIVED OCT 13 1992 OIL-CON
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

## GAS WELL

Actual Prod. Test - MCF/D 1236	Length of Test 1 hr.	Bbls. Condensate/MCF 120/Wtr	Gravity of Condensate
Testing Method (Pilot, back pr.) Pilot	Tubing Pressure (Shut-in) 1380	Casing Pressure (Shut-in) 1400	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.

*R. A. Allred*  
Signature  
R.A. Allred  
Drilling Supervisor  
Printed Name  
10-7-92  
Date  
(505) 599-3412  
Telephone No.

## OIL CONSERVATION DIVISION

Date Approved  
OCT 19 1992By *Burt J. Shum*  
SUPERVISOR DISTRICT #3  
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.