Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

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

Gas
P.C.D # 2804361

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
Phillips Petroleum Company	30-039-25318
Address 5525 Hwy. 64, NBU 3004, Farmington, NM 87401	

Reason(s) for Filing (Check proper box)
New Well [X] 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	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
San Juan 30-5 Unit 9258	216R	Basin Fruitland Coal 71629	XXX XX	SF-078740

Location
Unit Letter L : 2492 Feet From The South Line and 881 Feet From The West Line
Section 20 Township 30N Range 5W NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
Water Pod # 2804506	
Name of Authorized Transporter of Casinghead Gas or Dry Gas	**Address (Give address to which approved copy of this form is to be sent)**
PHILLIPS PETROLEUM COMPANY	5525 Hwy. 64, NBU 3004, Farmington, NM 87401

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?

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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-9-93	12-15-93	3225'	3221'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
6397'(Unprepared GL)	Basin Fruitland Coal	3091-3214'	3062'
Perforations			**Depth Casing Shoe**
Basin Fruitland Coal Intervals 3091-99', 3123-64' 3205'14'			3222'

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8", 36#, N-80	309'	250 sx Cl B
8-3/4"	7", 23#, J-55	3055'	600 sx 65:35 Poz &
6-1/8"	5-1/2", P-110	2958' - 3222'	150 sx Cl B
	3-1/2", 9.3# P-110	3062'	

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 Size**
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.** / **Gas - MCF**

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DEC 31 1993
OIL CON. DIV.
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
8847 MCFD	1 hr.	0 BWPD	
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**
pitot	860 SI	880 SI	2"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation ... is true and complete to the best of my knowledge and belief.

Ed Hasely
Signature
Ed Hasely — Printed Name
Environmental Eng. — Title
12-21-93 — Date
(505) 599-3460 — Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN - 3 1994

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.