

DISTRICT I  
P.O. Box 1900, Hobbs, NM 88240  
DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210  
DISTRICT III  
1000 E. 3rd St., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 8 504-2088

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REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator PHILLIPS PETROLEUM COMPANY	Well APN No. 30-045-27923
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"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <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 32-8 UNIT	Well No. 232	Pool Name, Including Formation BASIN FRUITLAND COAL	Kind of Lease State, Federal or Private	Lease No. SF-079013
Location Unit Letter H : 1582 Feet From The North Line and 880 Feet From The East Line Section 29 Township 32N Range 8W, NMPM, San Juan County				

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.	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 9-3-90	Date Compl. Ready to Prod. Perf'd 5-16-91	Total Depth 3551'		P.B.T.D. 3551'				
Elevations (DF, RKB, RT, GR, etc.) 6638'	Name of Producing Formation Fruitland	Top Oil/Gas Pay 3420'		Tubing Depth 3534'				
Perforations 3420' - 3546'				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	321.40'		250 Sx Cl G, Circ 112 Sx				
8-3/4"	7", 23#, J-55	3370'		500 Sx 65/35 Poz, 150 Sx				
6-1/4"	4-1/2", 11.6#	3550'		Cl G, Circ 112 Sx				
	2-3/8", 4.7#, J-55	3534'						

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

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MAY 30 1991  
OIL CON. DIV.  
DIST. 3

GAS WELL			
Actual Prod. Test - MCF/D 1974	Length of Test 1 hr.	Bbls. Condensate/Wtr 960/Wtr	Gravity of Condensate
Testing Method (pilot, back pr.) Pilot	Tubing Pressure (Shut-in) 375	Casing Pressure (Shut-in) 375	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	Drilling Supervisor
Printed Name 5-23-91	Title (505) 599-3412
Date	Telephone No.

OIL CONSERVATION DIVISION	
Date Approved	JUN 24 1991
By	Original Signed by CHARLES GHOLSON
Title	DEPUTY OIL & GAS INSPECTOR, DIST. #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.