Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico ergy, Minerals and Natural Resources Departn.

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I	T	O TRAI	NSPO	RTOIL	AND NA	UHAL GA	45	WN			
Operator Dividing Potagology Company						Well API No. 30-025-20884					
Phillips Petroleum Company								125-20884			
Address 4001 Penbrook Street,	Odosea	Тохас	~ 707	162						1	
Reason(s) for Filing (Check proper box)	CUESSA /	, lexas	5 /9/	02	X Oth	t (Please explo	zin)				
New Well		Change in]	Transport	ter of:	_	· ·		me & We	ell Numbe	er from	
Recompletion	Oil	~_	Dry Gas			ate 3-32			TI IVUIDA	st itom	
Change in Operator	Casinghead		Condens			fective					
19 A					COE 11		777	\			
and address of previous operator Che	vron U.	S.A. 1	nc.,	BOX T	<u>035, Hou</u>	ston, Te	xas //2	251			
IL DESCRIPTION OF WELL	AND LEA	SE									
Lesse Name Tract 25			Pool Na	me, Includi	ng Formation		Kind o	Lesse St.		ease No.	
Vacuum Glorieta East Unit 4 Vacuum G						lorieta State,			B-18	38-1	
Location											
Unit Letter F	_ :2	080	Feet Fro	m The No	orth Lin	and 198	0 Fe	et From The	West	Line	
				:							
Section 32 Township	<u>, 17-s</u>		Range	35-E	, N	MPM,	Lea	· · · · · · · · · · · · · · · · · · ·		County	
III. DESIGNATION OF TRAN) NATU	RAL GAS			of alic 4	is to be se		
Name of Authorized Transporter of Oil	IX.	or Condens			,		• • •		orm is to be se		
Texas-New Mexico Pipeline Company						P. O. Box 42130, Houston, Texas 77242 Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casing	nead Gas	\mathbf{X}	or Dry (785	1						
GPM Gas Corporation	111-2	<u> </u>	T	l Bas	1		Street, When		Texas	79762	
If well produces oil or liquids, give location of tanks.	Unit		Twp.	Rge.	ls gas actuall	Compared					
If this production is commingled with that i	<u> </u>	31 1		35E	Yes		INR_				
IT THE PRODUCTION IS COMMITTINGED WITH THE P IV. COMPLETION DATA	rom any ouse	t sease or p	ou, give	COMMITME	ing order nam	<u></u>		····			
IV. COM LETION DATA		Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)		i			,				i	
Date Spudded		Date Compl. Ready to Prod.			Total Depth			P.B.T.D.			
-	-										
Elevation 'TF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations								Depth Casin	ng Shoe		
TUBING, CASING AND					CEMENTI	NG RECOR	<u> </u>	,	_		
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT		
								ļ			
	TE EOD A	I I OWA	DIE		<u> </u>			<u> </u>			
V. TEST DATA AND REQUES OIL WELL (Test must be after n	I FUK A	LLUWA	LDLE oflored o		he savel to a	aread top all	lauahla far thi	adansk or ba	for full 24 hou	err)	
OIL WELL (Test must be after n Date First New Oil Run To Tank	Date of Tes		oj ioda o	и ана тиз		ethod (Flow, p			jor juli 24 mon	*3./	
Date Fire New Oil Ruth 10 18th	Date of les	L			1 10000mg .v.	, 10.71 P		,			
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis		·	Gas- MCF			
GAS WELL											
GAS WELL Actual Prod. Test - MCF/D	Length of 7	est			Bbis. Conde	sale/MMCF		Gravity of	Condensate		
PROMILE FOR FOR THE PROPERTY.	Tendin or 1est				The state of the s						
Testing Method (pitot, back pr.)	Tubing Pres	saure (Shut-	-in)		Casing Press	Casing Pressure (Shut-in)			Choke Size		
ASSERTED (PROCEDURE PER)											
VI ODER ATOR CERTIFIC	ATT OF	COLE	TTAR	CE						 	
VI. OPERATOR CERTIFIC				CE		OIL COI	NSERV	ATION	DIVISIO	NC	
I hereby certify that the rules and regul Division have been complied with and						5 5,		–		•	
is true and complete to the best of my		_			Date	. Annrai	של ה	C 06 19	393		
	/i//	ر ا	,			Approve					
10 MA///lesle						ORIGINAL SIGNED BY JERRY SEXTON					
A Signature					By_	By DISTRICT + SUPERVISOR					
L. M. Sanders - Super	<u>visor R</u>	egulate		ffairs	s						
Printed Name	,	'סזר' מ	Title	400	Title						
11-22-93 V		915) 3	968-1 968-1								
		1 696	heres (~.	H						

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.