

DISTRIBUTION		
SANTA FE		
FILE		
U.S.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	NAT	
OPERATOR		
PRODUCTION OFFICE		

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PHILLIPS PETROLEUM COMPANY

Address  
4001 Penbrook Odessa, Texas 79762

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Changed from Phillips Oil Company August 1, 1985
Recompletion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner PHILLIPS OIL COMPANY 4001 Penbrook Odessa, Texas 79762

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease
Philmex	18	Maljamar	Grayburg San Andres	State, Federal or Fee State	B-222
Location					
Unit Letter	C	660	Feet From The North	Line and	1980
Line of Section	36	T. Township	17 S	Range	33 E
				NMPM,	Lea

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Texas-New Mexico Pipeline Company	P. O. Box 2528 Hobbs, N. M. 88240	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Phillips Petroleum Company	4001 Penbrook Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	C	36	17S
			33E
Is gas actually connected?	yes	When	2-8-85

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. R
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations		Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 able for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	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

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (prod, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

G. L. Rose G. L. Rose  
(Signature)  
Controller  
(Title)  
August 1, 1985  
(Date)

OIL CONSERVATION DIVISION  
AUG 12 1985

APPROVED \_\_\_\_\_, 19 \_\_\_\_

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for a able on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of o well name or number, or transporter, or other such change of cond.  
Separate Forms C-104, must be filed for each pool in mul completed wells.