

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

API No. 30-025-26684

I. Operator
Phillips Petroleum Company

Address
Room 401, 4001 Penbrook St., Odessa, TX 79762

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner: NA

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Vacuum Gb/ SA Unit, Tract 3456	Well No. 008	Pool Name, Including Formation Vacuum Gb/SA	Kind of Lease State, KARAKOKO	Lease No. B-2273-2
Location Unit Letter <u>C</u> ; <u>2500</u> Feet From The <u>West</u> Line and <u>250</u> Feet From The <u>North</u> Line of Section <u>34</u> Township <u>17-S</u> Range <u>35-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas--New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, TX 79762			
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 33	Twp. 17-S	Rge. 35-E
	Is gas actually connected? Yes		When 12-18-80	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-7-80	Date Compl. Ready to Prod. 6-23-80		Total Depth 4800'		P.B.T.D. 4740'			
Elevations (DF, RKB, RT, GR, etc.) 3929' GL, 3941' RKB	Name of Producing Formation Grayburg-San Andres		Top Oil/Gas Pay 4055'		Tubing Depth 4531'			
Perforations 4433-4472'				Depth Casing Shoe 4789'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		354' (400 sxs C1 "H" 2% CaCl ₂)		(1/4#/sx Flocele. Circ 150 sxs to surface)			
8-3/4"	7"		4780' (800 sxs TLW w/10% DD, 12# salt, 3# Gilsonite, 1/4#/sx Flocele, Tail w/400 sxs C1 "H" w/5# salt, Circ. 100 sxs.					

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) 4531'


Date First New Oil Run To Tanks 12-18-80	Date of Test 12-18-80	Producing Method (Flow, pump, gas lift, etc.) Insert 2-1/2" x 1-1/2" x 16'	
Length of Test 24 hrs	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 2	Water-Bbls. 161	Gas-MCF 2

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


W. J. Mueller
(Signature)
Sr. Engr'g Specialist
(Title)
January 12, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
TITLE _____

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

STATE OF NEW MEXICO

INCLINATION REPORT

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT

API# 30-025-26684

Field Name Vacuum GB/SA County Lea
Operator Phillips Petroleum Company Address 4001 Penbrook City Odessa
Lease Name East Vacuum GB/SA Unit, Tract 3456 Well No. 008
Location Unit C 2500 feet from the west line and 250 feet from north line of Section 34, Township 17-S, Range 35-E

RECORD OF INCLINATION

Table with 4 columns: Depth (Feet), Angle of Inclination (Degrees), Depth (Feet), Angle of Inclination (Degrees). Contains data for depths 357, 863, 1420, 1904, 2489, 2952, 3027, 3570, 4067, 4800.

I hereby certify that I have personal knowledge of the data and facts placed on this form and that such information given above is true and complete.

Signature of W. J. Mueller, Sr. Engr'g Spec. with handwritten signature and title.

Sworn and subscribed to before me, this the 13th day of January

19 81

Signature of June Chase, Notary Public in and for Ector County, Texas

My Commission Expires