

DISTRIBUTION	
SALE TAX	
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

**I. OPERATOR**  
 Operator: **Phillips Petroleum Company**  
 Address: **Room 711, Phillips Building, Odessa, Texas 79761**  
 Reason(s) for filing (Check proper box):  
 New Well  Change in Transporter of: Oil  Dry Gas   
 Recompletion  Casinghead Gas  Condensate   
 Change in Ownership

If change of ownership give name and address of previous owner: **--**

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Sims</b>	Well No. <b>7</b>	Pool Name, including Formation <b>Drinkard</b>	Kind of Lease <b>Oil, Gas, or Condensate</b>	Lease No. <b>--</b>
Location: Unit Letter <b>C</b> Section <b>380</b> Feet From The <b>north</b> Line and <b>2310</b> Feet From The <b>west</b> Line of Section <b>24</b> Township <b>22-S</b> Range <b>37-E</b> <b>Lea</b> 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"/> <b>Texas New Mexico P.L. Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1510, Midland, Texas 79701</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Skelly Oil Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1351, Midland, Texas 79701</b>
If well produces oil or liquids, give location of tanks.	Unit: <b>E</b> Sec: <b>24</b> Twp: <b>22-S</b> Rge: <b>37-E</b> Is gas actually transported? <b>Yes</b> When: <b>4-25-73</b>

If this production is commingled with that from any other lease or pool, give commingling order number: **EFFECTIVE JANUARY 31, 1977, SKELLY OIL COMPANY MERGED INTO GETTY OIL COMPANY.**

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Re-worked <input type="checkbox"/>	Deepened <input type="checkbox"/>
Date Spudded <b>3-17-73</b>	Date Compl. Ready to Prod. <b>4-25-73</b>	Total Depth <b>7479'</b>	U.S.T.D.		
Elevations (DF, RKB, RI, GR, etc.) <b>3326' Gr.</b>	Name of Producing Formation <b>Drinkard</b>	Top Oil/Gas Leg <b>6140'</b>	Casing Depth <b>6316'</b>		
Perforations <b>7421, 7419, 7407, 7400, 7391, 7382, 7376, 7370, 7356, 7316, 7304, 7294, 7268, 7244, 7230, 7222, 7214, 7184, 6415, 6417, 7419, 6594, 6633, 6635, 6637, 6758, 6760, 6762, 6771, 6881, 6883, 6885,</b>		Depth Casing Shoe <b>7478'</b>			
<b>TUBING, CASING, AND CEMENTING RECORD 6931, 7001, 7092, 7115 feet</b>					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
<b>11"</b>	<b>8-5/8"</b>	<b>1161'</b>	<b>(200 sx Trin.LW/10%DD &amp; 10% salt, followed by 200sx Class H. Circ 50 sx.</b>		
<b>7-7/8"</b>	<b>5-1/2"</b>	<b>7478'</b>	<b>(1000sx Trin.LW &amp; 300sx Class H.</b>		
	<b>2-3/8"</b>	<b>6316'</b>	<b>(TOC at 2330'.</b>		

**V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL**

(Test must be after recovery of total volume of test 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 Tanks <b>4-25-73</b>	Date of Test <b>5-1-73</b>	Producing Method (Flow, pump, gas lift, etc.) <b>flowing</b>	
Length of Test <b>24 hours</b>	Tubing Pressure <b>620#</b>	Casing Pressure <b>--</b>	Choke Size <b>20/64"</b>
Actual Prod. During Test	Oil - Bbls. <b>176</b>	Water - Bbls. <b>0</b>	Gas - MCF <b>722</b>

**GAS WELL**

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate MCF/D	Gravity of Condensate
<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>

**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.

Dale J. Fisher **Dale J. Fisher**  
 (Signature)  
**Associate Reservoir Engineer**  
 (Title)  
**May 2, 1973**  
 (Date)

**OIL CONSERVATION COMMISSION**

APPROVED: \_\_\_\_\_, 19\_\_\_\_  
 BY: [Signature]  
 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 of the well in accordance with RULE 111.  
 All sections of this form must be filled out completely for allowable 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

