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O. C. D.  
ARTESIA OFFICEForm C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRORATION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Phillips Oil Company ✓	
Address 4001 Penbrook Street, Odessa, Texas 79762	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Burch C Federal To Correct Lease Name
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinthead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Burch C Fed.	Well No. 16	Pool Name, including Formation Grayburg-Jackson SR-Q-G-SA	Kind of Lease State, Federal or Fee Federal	Lease No. L.C. 028793-C
Location				
Unit Letter A	: 660	Feet From The North	660	Feet From The East
Line of Section 30	Township 17-S	Range 30-E	, NMPM, Eddy 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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, New Mexico 88210								
Name of Authorized Transporter of Casinthead 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, Odessa, Texas 79762								
If well produces oil or liquids, give location of tanks.	<table border="1"> <tr> <td>Unit</td> <td>Sec.</td> <td>Twp.</td> <td>Rge.</td> </tr> <tr> <td>0</td> <td>19</td> <td>17-S</td> <td>30-E</td> </tr> </table>	Unit	Sec.	Twp.	Rge.	0	19	17-S	30-E
Unit	Sec.	Twp.	Rge.						
0	19	17-S	30-E						
Is gas actually connected?	When								
Yes	February 6, 1971								

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

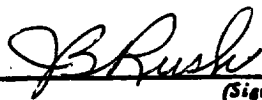
Post ID-3

12-14-84

Chg Well Name

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. 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 is true and complete to the best of  
my knowledge and belief.


J. B. Rush

Production Records Supervisor

(Title)

11-9-84

(Date)

## OIL CONSERVATION DIVISION

APPROVED DEC 10 1984

BY Original Signed By

Leslie A. Clements

TITLE Supervisor District II

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 allow-  
able 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.