

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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ARTESIA, N.M.  
Form C-104  
OFFICE 10-01-78  
Page 1

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.D.E.	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

I. Operator  
Phillips Oil Company

Address  
Room 401, 4001 Penbrook Street, Odessa, Texas 79762

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

Other (Please explain)  
Request 210 barrel testing allowable to evaluate Bone Spring.  
8010 - 8044 Feb.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Atalaya A Fed	Well No. 1	Pool Name, including Formation Undesignated Bone Spring	Kind of Lease State, Federal or Fee Federal	Lease No. NM 055850
Location Unit Letter L : 1980 Feet From The south Line and 660 Feet From The west Line of Section 35 Township 17-S Range 30-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

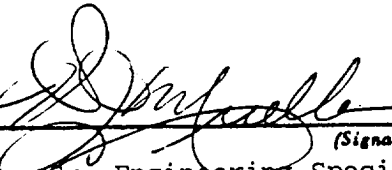
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Petroleum Company - trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. (test tank) L	Unit Sec. Twp. Rge. Is gas actually connected? When
	35 17-S 30-E No

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

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.

  
W. J. Mueller  
(Signature)  
Sr. Engineering Specialist  
(Title)  
January 30, 1985  
(Date)

OIL CONSERVATION DIVISION

FEB 4 1985

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_  
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 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 completed wells.