

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Phillips Petroleum Company	Well API No. 30-015-27441
Address 4001 Penbrook St., Odessa, Texas 79762	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name James E Fed.	Well No. 8	Pool Name, Including Formation Cabin Lake (Delaware)	Kind of Lease State, Federal or Other	Lease No. NM-0479142
Location SHL J 2247 South 1558 East				
BHL Unit Letter I : 1777 Feet From The South Line and 585 Feet From The East Line				
Section 11 Township 22-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) P. O. Box 791, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) 921 W. Sanger, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 11	Twp. 22S	Rge. 30E	Is gas actually connected? Yes	When? 9/11/93

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

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 6/17/93	Date Compl. Ready to Prod. 9/3/93		Total Depth 7600'		P.B.T.D. 7550'			
Elevations (DF, RKB, RT, GR, etc.) 3227' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 7388'		Tubing Depth 7341'			
Perforations 7388'-7492' (Delaware)					Depth Casing Shoe 7600'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		400'		800 sxs C Port IN-2			
12-1/4"	8-5/8"		3500'		2500 sxs C 3-4-94			
7-7/8"	5-1/2"		7600'		1510 sxs C temp & BR			
	2-7/8"		7341'					

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.)

Date First New Oil Run To Tank 9/5/93	Date of Test 9/11/93	Producing Method (Flow, pump, gas lift, etc.) 2-7/8" x 1-3/4" Pump	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure 100 psig	Choke Size
Actual Prod. During Test	Oil - Bbls. 54	Water - Bbls. 250	Gas - MCF 35

GAS WELL

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

VI. OPERATOR 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.

Signature L. M. Sanders  
Printed Name L. M. Sanders Supv., Reg. Affairs  
Date 10/11/93 Telephone No. 915/368-1488

OIL CONSERVATION DIVISION

Date Approved JAN 28 1994

By DISTRICT II

Title SUPERVISOR

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.