

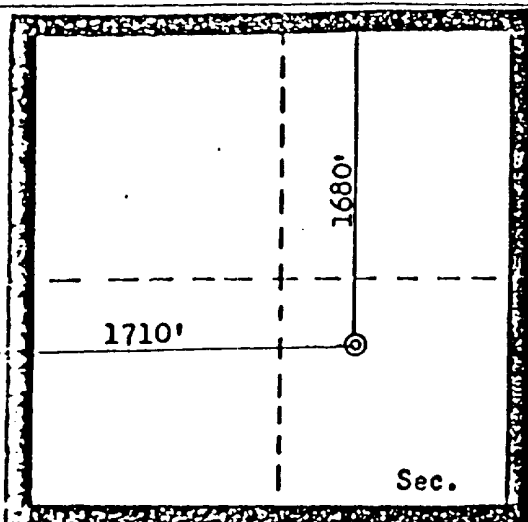
Operator <b>PHILLIPS PETROLEUM COMPANY</b>			Lease <b>SAN JUAN 32-8 UNIT</b>		Well No. <b>41</b>
Unit Letter <b>F</b>	Section <b>23</b>	Township <b>32N</b>	Range <b>8W</b>	County <b>San Juan</b>	
Actual Footage Location of Well:					
1680 feet from the North line and		1710 feet from the West line			
Ground Level Elev. <b>6978</b>	Producing Formation <b>Fruitland</b>	Pool <b>N. Los Pinos</b>	Dedicated Acreage <b>160</b>		Acre

1. Outline the acreage dedicated to the subject well by colored pencil or hinchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Unitization

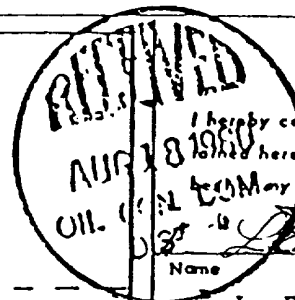
If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**RECEIVED**  
MAR 23 1992

**OIL CON. DIV. 1**  
**DIST. 3**



#### CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name L. F. Robinson

Position Sr. Drilg. & Prod. Engr.

Company Phillips Petroleum Company

Date March 20, 1992

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed May 15, 1980

Registered Professional Engineer and/or Land Surveyor

Fred. B. Kerr, Jr.

Certificate No. 3950

SEE REVERSE SIDE FOR TOPS

Ojo Alamo Ss	2714'
Kirtland Sh	2762'
Fruitland Fm	3336'
Fruitland Coal	3498'
Pictured Cliffs (Upper)	3765'
Pictured Cliffs (Lower)	3858'

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

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

# OIL CONSERVATION DIVISION

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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Phillips Petroleum Company		Well API No. 30-095241510
Address 5525 Hwy 64 NBU 3004, Farmington, NM 87401		
Reason(s) for Filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	<input checked="" type="checkbox"/> Other (Please explain) Pool Name Change From Albino PC
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>		

If change of operator give name and address of previous operator

### II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 32-8 Unit	Well No. 41	Pool Name, Including Formation N. Los Pinos Fruitland Sand	Kind of Lease State, Federal or Private	Lease No. SF-079380
Location Unk Letter F : 1680 Feet From The North Line and 1710 Feet From The West Line Section 23 Township 32N Range 8W, NMPLM San Juan County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Meridian Oil Transporters 2164412	Address (Give address to which approved copy of this form is to be sent) 3535 E. 30th, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation 2164430	Address (Give address to which approved copy of this form is to be sent) P.O. Box 58900, SLC, Utah 84158-0900	
If well produces oil or liquids, give location of tanks	Unit	Sec.
	Top	Rge.
Is gas actually connected?	When? Claire Potter	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

### 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

### 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. E. Robinson Sr. Drlg. & Prod. Engr.  
Printed Name  
March 20, 1992 (505) 599-3412  
Date Telephone No.

### OIL CONSERVATION DIVISION

Date Approved MAR 23 1992  
By ORIGINAL SIGNED BY ERNIE BUSCH  
Title DEPUTY OIL & GAS INSPECTOR, DIST. 3

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

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