<u>DISTRICT |</u> P.O. Box 1949, Hobbe, NM 84240

HSTERCT II O. Drewer DD, Arcele, NM \$4210

## **OIL CONSE**

Santa Fe, New Mexico 87504-2088

RVATION DIVISION P.O. Box 2088		
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See Instructions at Bottom of Page
See Instructions at Bottom of Pag

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Phillips Petroleum Company 5525 Hwy 64 NBU 3004, Farmington, NM 87401 Resson(s) for Filing (Check proper box) Other (Please explain)  $\mathbf{x}$ Change in Transporter of: New Woll Dry Gas Recompletion Pool Name Change Casinghead Ons Condensate Change in Operator change of operator give name IL DESCRIPTION OF WELL AND LEASE Lease No. Well No. Pool Name, Including Formation Kind of Lease Lease Name PC Sate Federal & For SF-078542 S. Los Pinos Fruitland Sand San Juan 32-7 Unit Location Feet From The South Line and 660 Feet From The . Line Unit Letter \_\_ San Juan Section 28 32N 7W County Township NMPM Range III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Meridian Oil Transporters,  $\Box$ Inc. 3535 E. 30th, Farmington, NM 87401 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gos or Dry Cas [X] PO Box 58900 Salt Lake City, UT 84158-0900 Northwest Pipeline Corporation If well produces oil or liquids, give location of tanks. Rge. Is gas actually connected? Unit Top Sec If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Well Workover Doepes Plug Back Same Res'v Diff Res'v Oil Well Gas Well Designate Type of Completion - (X) Total Depth PRTD Date Spudded Date Compl. Ready to Prod. Top Oll Gas Pay Name of Producing Formation Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE , TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth of be for hell a Rua To Teak

Date of Test

Producing Method (Flow, pump, gas lift, D) OIL WELL Date First New Oil Run To Tank Hote Size Carine Proseure FEB1 61993 Tubing Pressure Length of Test OIL CON. L.Y Water - Bbls. Oil - Bbb. Actual Prod. During Test DIST. 3 GAS WELL Gravity of Condensate Bols. Coodensus MMCF Length of Test Actual Fred Test - MCF/D Choke Size Casing Pressure (Shut-la) Tubing Pressure (Shut-in) Testing Method (pitat, back pr.) VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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. 3.1) d LE Column By\_ L. E. Robinson Sr. Drlg. & Prod. Engr

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

Printed Name

2-12-93

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

Telephone No.

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.

<u>(505)</u> 599-3412