

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF LEASES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Phillips Petroleum Company

Address 4001 Penbrook, Odessa, Texas 79762

Reason(s) for filing (Check proper box)  New Well  Recompletion  Change in Ownership  Change in Transporter of Oil  Castinhead Gas  Dry Gas  Condensate

Other (Please explain) Effective Date 1-1-86

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>East Vacuum G/SA Unit, Tract No. 3456</u>	Well No. <u>005</u>	Pool Name, including Formation <u>Vacuum G/SA</u>	Kind of Lease <u>State</u>	Lease No. <u>B-2273</u>
Location				
Unit Letter <u>C</u>	<u>1030</u> Feet From The <u>North</u> Line and <u>1410</u> Feet From The <u>West</u>			
Line of Section <u>34</u>	Township <u>17-S</u>	Range <u>35-E</u>	<u>NMPM</u> Lea	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"/> <u>Texas-New Mexico Pipeline</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2528, Hobbs, N.M. 88240</u>
Name of Authorized Transporter of Castinhead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks.	Unit <u>I</u> Sec. <u>33</u> Twp. <u>17S</u> Rge. <u>35E</u> Is gas actually connected? <u>Yes</u> When <u>7-23-79</u>

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.

Ken Johnson Ken Johnson  
(Signature)  
Production Records Supervisor  
(Title)  
January 24, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 6 - 1986, 19  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
TITLE \_\_\_\_\_

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 Form C-104 must be filed for each pool in multi-completed wells.

RECEIVED  
FEB 20 1986  
O.C.P.  
HOBBS OFFICE