FILE		ONSERVATION C AISSION FOR ALLOWABLE AND INSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-1 Elfective 1-1-65
LAND OFFICE		NOT ON TOTE AND NATURAL G	
OPERATOR I			001V 4 1981
PRORATION OFFICE			ARTESIA, OFFICE
William N. Beach			OFFICE
A.ddress P. O. Box 3669, Mi	dland, TX 79 702		
Fleason(s) for filing (Check proper bo New Well XXX Ke Ent		Other (Please explain) Request for all	owable
New Well Art Le Child	Cil Dry Ga		
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name and address of previous owner			
. DESCRIPTION OF WELL AND	LEASE		
New Mexico	Well No.; Pool Name, Including F	ast, Q-G State, XXXXX	XXXX State L-1603
Location		······································	
Unit Letter;;	990 Feet From The West Lin	te and Feet From T	he North
Line of Section 36 To	ownship 16-S Range 2	28-Е , _{NMPM} , Eddy	County
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	\S	
Name of Authorized Transporter of O	11 XX or Condensate	Address (Give address to which approve Box 1183, Houston, TX	
The Permian Corpora	asinghead Gas 🕅 or Dry Gas 🗍	Address (Give address to which approve	ed copy of this form is to be sent)
Phillips Petroleum	Unit Sec. Twp. P.ge.	100 Pioneer Bldg, BAr	tlesville, OK 74004
If well produces oil or liquida, give location of tanks.	Unit Sec. Twp. P.ge. F 36 16-S 28-E		-1-81
If this production is commingled w	with that from any other lease or poo,	give commingling order number:	
COMPLETION DATA Designate Type of Complet:	Oil Well Gas Well	Naw Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1-10-80	4-15-81	1725	1713
Elevations (DF, RKB, RT, CR, etc.) 3580 GR	Name of Producing Formation Penrose	Top Oil/Gas Pay 1615	1660
Perforations			Depth Casing Shoe 1718
1618-28, 1656-62,	TUBING, CASING, ANI	D CEMENTING RECORD	1/10
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	sacks cement 150 sx "C"
7"	8-5/8" 20#	356	Pulled
6"	4-1/2" 10.50#	1718	
	COR ALLOWARIE (Test must be a	1 fter recovery of total volume of load oil a	nd must be equal to or exceed top allo
. TEST DATA AND REQUEST I	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas life	
Date First New Oil Run To Tanks 4-1-81	Date of Test 5-26-81	Pump	A) of a company
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours Actual Prod. During Test	<u>20</u> Oil-Bbla.	20 Water-Bble.	2" open
2	2	3	0 6
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
			L TION COMMISSION
. CERTIFICATE OF COMPLIA!	VCE		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED JUN 0 9 1981	
		BY	
$\int $		TITLE NIPERVISOR_ DI	T + _
11 1 Jones Maria		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the wall in accordance with RULE 111.	
Production Superintendent			
		All sections of this form mul	it be filled out completely for allo
6-1-81 (Title)		able on new and recompleted we Fill out only Sections I, II	tit and VI for changes of owned
(Date)		well name or number, or transport	er, or other auch change of condition be filed for each pool in multip

completed wells.