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O. C. D.

ARTESIA, OFFICE

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTForm C-104
Revised 12-01-78
Format 05-01-83
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REGISTRATION RECEIVED	
DISTRIBUTION	
ARTESIA	<input checked="" type="checkbox"/>
ILE	<input checked="" type="checkbox"/>
A.C.G.	
AND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRORATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-015-03057

Operator

Phillips Oil Company

Address

4001 Penbrook Street, Odessa, Texas 79762

Reason(s) for filing (Check proper box)

☐ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☐ Oil
☐ Casinghead Gas

☐ Dry Gas
☐ Condensate

Other (Please explain)

Dissolution of Grayburg Keely Unit
 effective January 1, 1985
 (Formerly identified as: Grayburg Keely
 Unit, Tract BC, #1)

Change of ownership give name
 and address of previous owner

INJECTION WELL

DESCRIPTION OF WELL AND LEASE

Well Name Burch C Fed	Well No. 1	Pool Name, including Formation Grayburg-Jackson, 7R-Q-Gb-SA	Kind of Lease State Federal XXXX	Lease No. LC-028793-c
Location Unit Letter <u>E</u> : <u>2880</u> Feet From The <u>south</u> Line and <u>855</u> Feet From The <u>west</u> Line of Section <u>23</u> Township <u>17-S</u> Range <u>29-E</u> , NMPM, <u>Eddy</u> County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
(Well produces oil or liquids, give location of tanks.	Is gas actually connected? <u>No</u> When <u>3-15-85</u> <u>Edwell</u>

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.

I. CERTIFICATE OF COMPLIANCE

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.

Thaddeus McLemore T. H. McLemore
 (Signature)

Regulatory & Proration Supervisor

(Title)

February 7, 1985

(Date)

OIL CONSERVATION DIVISION

MAR 11 1985

APPROVED _____, 19

BY Original Signed By

Leslie A. Clements

TITLE Supervisor District II

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 allow-
 able 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 Forms C-104 must be filed for each pool in multiply
 completed wells.

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FBI - BOSTON