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O. C. D.  
ARTESIA, OFFICEForm C-104  
Revised 10-01-78  
Format 05-01-83  
Page 1STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-015-03058

Operator <u>Phillips Oil Company</u>	
Address <u>4001 Penbrook Street, Odessa, Texas 79762</u>	
Reason(s) for filing (Check proper box)	Other (Please explain) Dissolution of Grayburg Keely Unit effective January 1, 1985 (Formerly identified as: Grayburg Keely Unit, Tract BC, #4)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: ** <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate

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

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Burch C Fed</u>	Well No. <u>4</u>	Pool Name, including Formation <u>Grayburg-Jackson, 7R-Q-Gb-SA</u>	Kind of Lease <u>State, Federal, or Other</u>	Lease No. <u>LC-028793-c</u>
Location Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>south</u> Line and <u>1980</u> Feet From The <u>east</u> Line of Section <u>23</u> Township <u>17-S</u> Range <u>29-E</u> , NMPM, <u>Eddy</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Navajo Refining Company</u>	<u>Box 159, Artesia, New Mexico 88210</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Company</u>	<u>4001 Penbrook Street, Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>N 23 17S 29E</u>	<u>Yes 3-1-62 Post T.D. 1</u>

If this production is commingled with that from any other lease or pool, give commingling order number: 3-15-85

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.

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

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HOUSE