VE.	STATE OF NEW MEXICO BGY AND MINERALS DEPARTMENT			RECEIVED-78
	00. 01 100/10 00101010	P. O. BO		
		SANTA FE, NEW	V MEXICO 87501	JUN 24 1983
		REQUEST FOR	R ALLOWABLE	O. C. D.
i	TRANSPORTER OAS	• •	ND PORT OIL AND NATURAL GAS	ARTEGIA, OFFICE
۱.	PRONATION OFFICE Operator			
:	Phillips Oil Company			
	P. O. Box 128, Loco Hills, New Mexico 88255 Reoson(s) for filing (Check proper box) Other (Please exploin)			
	New Well	Change in Transporter al:	Change in Lease	e Name
	Recompletion Change in Ownership X	Oil Dry Ga Casingheod Gas Conder		
	If change of ownership give name Ge and address of previous owner	eneral American Oil Co. c	of Texas, P. O. Box 128,	, Loco Hills, NM 88255
I.	DESCRIPTION OF WELL AND I	LEASE	ermation Kind of Lea	Dee CLease No.
	Keely-B Fe	d 19 Grayburg-Jacks		rol or F•• Federal (b) Tr.A
	Localion H 134!	5 North Feel From TheLin	25. Feet From	East
	Unit Letter;;	mship 17-S Range	29-E , NMPM,	Eddy County
1.	DESIGNATION OF TRANSPORT	IX or Condensate	Andress (Give address to which appr	roved copy of this form is to be sent)
	Navajo Refining Compan	y — Pipeline Division Inghead Gas 🕼 or Dry Gas 🗍		roved copy of this form is to be sent)
	Phillips Petroleum Com		Phillips Building Od	essa, Texas /9/62
	If well produces oil or liquids, give location of tanks.	B 26 17S 29E	Yes	March 1, 1962
	If this production is commingled with that from any other lease or pool, give commingling order number: <u>COMPLETION DATA</u> Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv.			
	Designate Type of Completio			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
	Perforations Depth Casing Shoe			
			D CEMENTING RECORD	SACKS CEMENT
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	
				il and must be equal to be exceed top allow
.'.	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 allow able for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test		
	Length of Toel	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Cil-Bble.	Water-Bbla.	Gos-MCF
		1		T. T. D. St. St.
	GAS WELL Astual Prod. Tool-MCF/D	Longth of Tost	Bbls. Condensate/AMCF	Gravity of Conden and
	Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Cosing Presewe (Shut-in)	Choke Size
! .	CERTIFICATE OF COMPLIANO	CE	DIL CONSERV	ATION DIVISION 1983
I hereby certify that the rules and regulations of the Oll Conservation			APPROVED	
	Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYLeslie A. Clements Supervisor District II	
			TITLE	
	Lun Mandein		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
	Lendell N. Hawkins (Signa		If this is a request for information by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections 1, 11, 111, and VI for changes of owner.	
	Field Super			
april 1, 1983 (Date)			well name or number, or tianep	. 11, 11, and VI for thange of condition outer, or other such change of condition