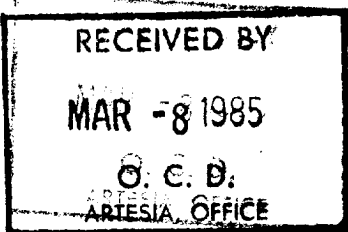


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-015 -03135

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 ☐ Dry Gas ☐ Casinthead Gas ☐ Condensate
 Other (Please explain): Dissolution of Grayburg Keely Unit effective January 1, 1985 (Formerly identified as: Grayburg Keely Unit, Tract KC, #14)
 Change of ownership give name and address of previous owner: INJECTION WELL

I. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Keely C Fed</u>	Well No. <u>14</u>	Pool Name, including Formation <u>Grayburg-Jackson, 7R-Q-Gb-SA</u>	Kind of Lease <u>State Federal xxx</u>	Lease No. <u>LC-028784-C</u>
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>north</u> Line and <u>660</u> Feet From The <u>west</u> Line of Section <u>26</u> Township <u>17-S</u> Range <u>29-E</u> , NMPM, <u>Eddy</u> County				

II. 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 Casinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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>No</u> <u>Post FD-3 3-22-85 By: Will Name</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.

T. H. McLemore
(Signature)
Regulatory & Proration Supervisor
(Title)
February 7, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 19 1985, 19
BY Original Signed By
Leslie A. Clements
TITLE Supervisor District II

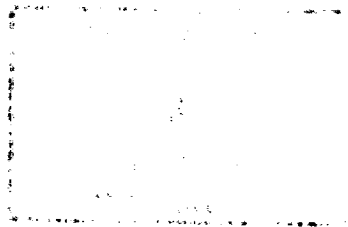
This form is to be filed in compliance with RULE 1104.

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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