## STATE OF NEW MEXICO ERGY AND MINERALS DEPARTMENT

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

RECEIVED BY

AUG 01 19 Form C-104
Format 06-0-78
O. C. D. Page 1

ARTESIA, OFFICE

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PHILLIPS PETROLEU	M COMPAN	▼ /		· · · - ·		-	
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4001 Penbrook	0dessa	, Texas 79762	2	•			
son(s) for filing (Check proper box)				Other (Pleas	e explain)		- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
New Well	Change in	Transporter of:		Changed from			
Recompletion	OII	<del></del>	Dry Gas	Phillips Oil Company August 1, 1985			1. 1985
Change in Ownership	Castna	phone Ges	Condensate	1111111	orri compa		1, 1505
senge of ownership give name PI	HILLIPS (	OIL COMPANY	4001 Pen	brook	Odessa, T	exas	
DESCRIPTION OF WELL AND L	EASE						
se Name	Mett No. 1	Pool Name, Including			Kind of Lease		Lease No
urch C Test	9 G	rayburg-Jackso	on-SR-Q-	G-SA	State, Federal or	<b>F</b> Federal	028793-0
ation		• .				_	
Unit Letter B : 660	Feet From	The North L	ne and1	980	Feet From The	East	
30	17-S		30-E	\n		Eddy	<b>C</b>
Line of Section 30 Townsh	10 0	Range		, NMPM	<u> </u>	Ваау	County
DESIGNATION OF TRANSPORT  no of Authorized Transporter of OHXXX  avajo Refining Company	or Com	ine Division	P. O.	Box 159	Artesia, Nev	copy of this form of Mexico 88	210
ne of Authorized Transporter of Casing's hillips Petroleum Company		or Dry Gas			to which approved Odessa, Texa	eopy of this form as 79762	is to be sent)
reli produces oil or liquids, o location of lanks.		Twp. Rqc.	· '	tually connect Yes	ed? When	March 1, 19	62
is production is commingled with the	nat from any	other lease or pool.	, give coma	ningling orde	r number:	P	nt ID-3
TE: Complete Parts IV and V or							8-9-85
			ii .			· C	y op name
CERTIFICATE OF COMPLIANCE	E	•			ONSERVATIO	IN DIVISION	ð ·/
aby corrify that the rules and remulations of	of the Oil Con	servation Division have	APPR	OVED	AUG 61	985	
eby certify that the rules and regulations of the Oil Conservation Division have complied with and that the information given is true and complete to the best of				- V	ORIGINAL SIGN		-,
nowledge and belief.			BY		BA FVBBA BBOO	NKC.	
			TITLE		GEOLOGIST - NM	OCD 4 3.	
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Signature roduction Records Superv	•	·	well, th	is form mus	t be accompanie	ie for a newly dr d by a tabulation sce with RULE	of the deviat:
(Title)					this form must becompleted wells	e filled out com	pletely for allo
uly 24, 1985			Fi	l out only	Sections I, II, II	I, and VI for ci	nangus of own
(Date)			well na	wa or unupai	, or transporter,	or other auch cha flied for each	inge of condition