

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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O. C. D.
ARTESIA, OFFICE
Form C-104
Revised 10-0-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
PHILLIPS OIL COMPANY ✓
Address
Room 401, 4001 Penbrook St., Odessa, Texas 79762
Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion Temp Chg Status
☐ Change in Ownership
Currently Water Inj.
Change in Transporter of:
☒ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
Request 1000 barrel testing allowable to flow well, test for casing leak.

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Grayburg-Jackson Waterflood Unit, TR BB	Well No. 1	Pool Name, including Formation Grayburg-Jackson SR-Q-GR-SA	Kind of Lease State , Federal xxx NM	Lease No. 0467934
Location Unit Letter A : 330 Feet From The north Line and 990 Feet From The east Line of Section 33 Township 17-S Range 30-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

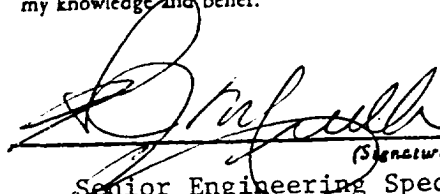
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navaho Refining Company	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia New Mexico 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> -	Address (Give address to which approved copy of this form is to be sent) -
If well produces oil or liquids, give location of tanks. test tank A	Unit Sec. Twp. Rge. Is gas actually connected? When 33 17-S 30-E --

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.


(Signature) W. J. Mueller
Senior Engineering Specialist
(Title)
April 30, 1984
(Date)

OIL CONSERVATION DIVISION
MAY 03 1984
APPROVED _____
BY _____
TITLE _____
Original Signed By
Leslie A. Clements
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.