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DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico rinergy, Minerals and Natural Resources Department

RECEIVED

Form C-104 Revised 1-1-89 See Instruction

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

SEP 07 '90

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			ALLOWAE				=	·E	
• Operator		/ Individ	JI OITI OIL	און טוור.	I UNAL GA		ITESIA, OFFIC IPI No.	<del>-</del>	
SOUTHWEST ROYALTIES	. INC.					1	-015-206	40	
ddress	*		·			1 30	-013-200	<del></del>	
407 N. Big Spring,	Suite 3	300, Mid	land, TX			<del></del>			
eason(s) for Filing (Check proper box)				Och	es (Please expla	rin)			
ew Well	Oil	Change in Tra	• —						
Accompletion	Ou Casinghead		odensate	Ff	fective	Date:	January	1 1000	
								<del></del>	
d address of previous operator PHIL  DESCRIPTION OF WELL			COMPANY,	4001 P6	enbrook,	<u>udessa</u> ,	lexas	79762	
case Name #3 FED	Well No. Pool Name, Includi			ng Formation			Kind of Lease No.		
Parke E Fed #3	3 Fren Seve				1	Federal er Fee LC-029020-			
OCATION H	. 16		st From The	-		<del>1</del> .		-	
Section 22 Township		_						Easi	Line
		2	age 30F		мрм,	<u>_</u>	ddy		County
I. DESIGNATION OF TRAN  ame of Authorized Transporter of Oil		OF OIL OF CONDENSATE			e address to wh	ich approud	some of this for	:- :- :-	4)
•				1			copy of this form is to be sent)		
lame of Authorized Transporter of Casing	any - Pipeline Division  aghead Gas X or Dry Gas			Address (Giv	DUX 159	Artes	ia, New Mexico 88210 copy of this form is to be sent)		
Phillips 66 Natural G	-	_			Penbrook				77
well produces oil or liquids,		Sec. Tw	p. Rge.	Is gas actuali		When		13106	<del></del>
ve location of tanks.	<u>i H</u>	22 1 1	7S 30E			i	<b>=</b>		
this production is commingled with that it	from any othe		, give commingl	ing order num	ber:				
Designate Type of Completion	- (X)	Oil Well	Gas Well	New Well	Workover	Docpes	Plug Back	Same Res'v	Diff Res'v
ste Spudded	Date Compl	. Ready to Pro	d.	Total Depth	1	I	P.B.T.D.	·	L
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
erforations							Depth Casing	Shoe	
	T	UBING, C	SING AND	CEMENTI	NG RECOR	D			
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
· · · · · · · · · · · · · · · · · · ·	<del> </del>		<del></del>						
	<del> </del>	<del></del>	<del></del>						
. TEST DATA AND REQUES	T FOR A	LLOWABI	LE	<u> </u>			1	<del></del>	
IL WELL (Test must be after n				be equal to or	exceed top allo	wable for this	depth or be fo	or full 24 hours	r.)
ate First New Oil Run To Tank	Date of Test			Producing Method (Flow, pump, gas lift, etc.)					
ength of Test	Tubing Pressure			Casing Pressure			Choke Size 9-14-90		
ctual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas-MCF Chy OP		
GAS WELL						<del></del>			
Actual Prod. Test - MCF/D	Length of T	est	<del></del>	Bbls. Conde	nate/MMCF		Gravity of C	ondensate	
sting Method (pilot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
L OPERATOR CERTIFIC	ATE OF	COMPLI	ANCE					· · · · · · ·	<del> </del>
wereby certify that the rules and regula					OIL CC!	CEUN	ATION :		N
Division have been complied with and	that the inform	mation given a						4000	
is true and complete to the best of my i	cnowledge and	d belief.		Date	Approve	d	SEP 14	1990	
Or Han					€ F : 2 : €				
S. L. Januar			<del></del>	By_	OP4	CIADA C	ANED EV		
S.C. Garner C	nust	tion The	190	-,-		iann <del>e a a</del> E Voltain			
Signature S.C. O.7 Y N SV C  Printed Name 9 9 9 9	C	Tit	lé	Title	SUF			TH.	
9-5-90 Date	415-6	206 79	<u> 27</u>	'					
Date		i ejebbo	DE INO.	11					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.