## STATE OF NEW MEXICO MINITIALS DEPARTMENT

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FILE		1	1	
U.S.U.S.				
LAND OFFICE		l	_	ŀ
TRANSPORTER	OIL	1		
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OPERATOR		V		
PADRATION OFFICE		1		L

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

RECEIVED

JUN 24 1983

## REQUEST FOR ALLOWABLE .... AND

O. C. D.

OPERATOR V	AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS	ARTEGIA, OFFICE			
Operator Phillips O	il Company					
Phillips Oil Company  P. O. Box 128, Loco Hills, New Mexico 88255						
Reason(s) for filing (Check proper box)		Other (Please explain)				
New Well	Change in Lease Name					
Aecompletion		Condensate Burch C				
Change in Ownership X	Casingheod Gas Conden	ade Dureit C				
If change of ownership give name Gand address of previous owner	eneral American Oil Co. o	of Texas, P. O. Box 128,	Loco Hills, NM 88255			
DESCRIPTION OF WELL AND I	LEASE	execution   Kind of Leas	e Lease No.			
Lease Name Burch-CC Fe	hell No. I Pool Name, including to	son SR-Q G SA State, Federa	·			
Location						
Unit Letter H : 19	80 Feet From The North Line					
Line of Section 30 T. A	mahip 17-S Ronge	30-Е , ммрм,	Eday County			
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S   Address (Give address to which appro	wed copy of this form is to be sent)			
Name of Authorized Transporter of Cli	ny — Pipeline Division	P.O. Box 159 Artesia	, New Mexico 88210			
Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Address (Give address to which appropriately Phillips Building Od	ved copy of this form is to be sent)  Desca Texas 79762			
Phillips Petroleum Co	mpany 'Unit   Sec.   Twp.   Rge.	Is gas actually connected? Wh	en			
If well produces oil or liquids, give location of tanks.	0 19 17S 30E	<u> </u>	June 20, 1972			
If this production is commingled wit COMPLETION DATA	h that from any other lease or pool, Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty.   Diff. Resty.			
Designate Type of Completic		1 1				
Date Spudded	Date Campl. Ready to Prod.	Total Depth	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
Perforations			Depth Casing Shoe			
	TUBING, CASING, AND	CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
·						
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	l and must be equal to or exceed top allow-			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ifi, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Chote Size			
Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Gas-MCF A G			
			L'A Male			
Actual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Cravity of Condensate			
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)	Coming Pressure (Ebut-in)	Chore Size			
DEDEKICATE DE COURLIAN	CE	OIL CONSERVA	TION DIVISION			
CERTIFICATE OF COMPLIAN	•	APPROVED JUN 2 8 1983				
I hereby certify that the rules and regulations of the Oll Conservation Division have been complied with and that the information given		Original Signed By				
above is true and complete to the	best of my knowledge and belief.	BY Lettie A. Clemen Supervisor District	***			
_		TITLE	compliance with RULE 1104.			
Q 1 10 1/2	Ch ·	11	makin for a newly drilled or despense			
well, this form must be accompanied by a			ARIAN DV & LEDNIBLION OF THE CO.			
Field Superintendent All sections of this for			oust be filled out completely for allow-			
April 11.1983		Fill out only Sections I.	<ol> <li>III, and VI for thenges of ownsenter, or other such change of condition.</li> </ol>			
-7 · (De	ole)	Varma C-104 my	ist he filed for each pool in multip			

	LC-028793-c
SUNDRY NOTICES AND REPORTS ON WEL (Do not use this form for proposals to drill or to deepen or plug back to a diffe Use "APPLICATION FOR PERMIT—" for such proposals )	A toon
OF OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
General American Oil Company of Texas  3. ADDRESS OF OPERATOR	Burch C  9. WELL NO.
P. O. Box 128, Loco Hills, New Mexico 88255.  Location or Well (Report location clearly and in accordance with any State require See also space 17 below.)  At surface	'Grayburg Jackson
1980' FNL and 660' FEL U.S. 6300000	Sec. 30. T-17-S. R-30-E
14. PERMIT NO. 15. ELEVATIONS (Show whether by, st., or, etc.)	1
3585'_ GL	Eddy   New Mexico
16. Check Appropriate Box To Indicate Nature of N	
NOTICE OF INTENTION TO:	AUBHEQUENT REPORT OF:
	R SHUT-OFF REPAIRING WELL X ALTERING CASING
PRACTICES TREAT	TING OR ACIDIZING X ABANDONMENT®
CHANGE PLANS	
(Other)	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
<ol> <li>DESCRIBE PROPOSED OF COMPLETED OPERATIONS (Clearly state all pertinent details, and proposed work. If well is directionally drilled, give subsurface locations and men nent to this work.)</li> </ol>	I give pertinent dates, including estimated date of starting any isured and true vertical depths for all markers and zones perti-
The following work was done:	
1. Small workover pit was dug and rods and tub	ing were pulled.
2. Retrievable bridge plug was set above curre	ent producing zone.
<ol> <li>Ran Acoustic log to determine top of cement cementing of the Seven Rivers zone. Cement Class "H" cement with 5# salt and 10# sand</li> </ol>	ed with 100 sacks of Halliburton
4. Cement was drilled out.	
5. Seven Rivers zone was perforated from 1750	- 1756' (2 shots per ft.).
<ol> <li>Seven Rivers zone was sand fraced with 20,0 15,000# of 20/40 mesh bulk sand.</li> </ol>	000 gallons of gelled water containing
7. Retrievable bridge plug was retrieved and w	vell was returned to production.
18. I hereby certify that the foregoing is true and correct SIGNED PAULON N. Warkins TITLE ASST. Field	d Superintendent DATE January 28, 1980
(This space for Federal or State office use)	0861 63 MAL
APPROVED BY TITLE	FRIGIT MENDES DATE
CONDITIONS OF APPROVAL, IF ANY:	