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RECEIVED BY CONSERVATION DIVISION
P. O. BOX 2088
ATOKA, NEW MEXICO 87501
FEB 19 1985
O. C. D. REQUEST FOR ALLOWABLE
ARTESIA, OFFICE AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Phillips Oil Company ✓
Address
4001 Penbrook, Odessa, Texas 79762
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter oil:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐ Effective: 12-1-83
Other (Please explain)
If change of ownership give name and address of previous owner
Phillips Petroleum Company, 4001 Penbrook, Odessa, Texas 79762

I. DESCRIPTION OF WELL AND LEASE

Lease Name Green "A" AB	Well No. 3	Pool Name, including Formation Grayburg Atoka	Kind of Lease State, Federal or Fee Federal	Lease No. NM 014840
Location Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line of Section 29 Township 17-S Range 29-E, NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company - Trucks	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159 Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Western Gas Interstate Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1141 Midland, Texas 79702					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 29	Twp. 17S	Rge. 29E	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. 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

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 2-22-85 High Up Navajo
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

I. 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 above is true and complete to the best of my knowledge and belief.

J. B. Rush
(Signature)
Production Records Supervisor
February 8, 1985
(Date)

OIL CONSERVATION DIVISION

FEB 19 1985

APPROVED _____, 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 title. Separate forms C-104 must be filed for each pool in multi-

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O.C.D.
HODEN OFFICE