

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
70 Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brans Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form Q-104  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Coastal Management P. O. Box 2726 Midland, Texas 79702-2726		OGRID Number 127951
		Reason for Filing Code CH 11-1-94
API Number 30-0 15-23123	Pool Name Grayburg Jackson 7 Rvs-Qn-Gb-SA	Pool Code 28509
Property Code -9119 16030	Property Name Maddren A Federal	Well Number 4

II. Surface Location

UL or lot no. B	Section 28	Township 17-S	Range 30-E	Lot/Idn	Feet from the 330	North/South Line North	Feet from the 1650	East/West line East	County Eddy
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Bottom Hole Location

UL or lot no. B	Section 28	Township 17-S	Range 30-E	Lot/Idn	Feet from the 330	North/South line North	Feet from the 1650	East/West line East	County Eddy
Use Code F	Producing Method Code P	Gas Connection Date 6/23/81	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
015694	Navajo Refining Company P. O. 159 Artesia, NM 88210	2092210	0	G, 28, 17-S, 30-E Tank Battery
009171	GPM Gas Corporation 4044 Penbrook Odessa, TX 79762	2092230	G	G, 28, 17-S, 30-E Tank Battery

IV. Produced Water

POD 2092250	POD ULSTR Location and Description G, 28, 17-S, 30-E Tank Battery
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
			Post ID-3	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules 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.

Signature:

*J. W. Ramsey*

Printed name:

J. W. Ramsey

Title:

Vice President/Exploitation

Date:

11/1/94

Phone:

915/688-0700

OIL CONSERVATION DIVISION

Approved by:

*Jim W. Geun*

Title:

*District Supervisor*

Approval Date:

NOV 21 1994

If this is a change of operator fill in the OGRID number and name of the previous operator

Phillips Petroleum Company (017643)

Previous Operator Signature

*L. M. Sanders*

Printed Name

L. M. Sanders, Supervisor Regulatory Affairs

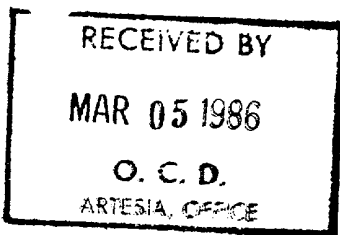
Title

Date

11/1/94

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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PROBATION OFFICE	<input type="checkbox"/>



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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator PHILLIPS PETROLEUM COMPANY

Address 4001 Penbrook Odessa, Texas 79762

Reason(s) for filing (Check proper box):  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☒ Crudehead Gas  
☐ Dry Gas  
☐ Condensate  
 Other (Please explain) Effective date 1-1-86

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Maddren-A Fed</u>	Well No. <u>4</u>	Pool Name, including Formation <u>Grayburg-Jackson SR 0-G-SA</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>LC053259-A</u>
Location Unit Letter <u>B</u> : <u>330</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>East</u> Line of Section <u>28</u> Township <u>17S</u> Range <u>30E</u> , NMPM, <u>Eddy</u> 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"/> <u>Navajo Refining Company - Pipeline Division</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 159, Artesia, New Mexico 88210</u>
Name of Authorized Transporter of Crudehead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks. Unit <u>G</u> Sec. <u>28</u> Twp. <u>17S</u> Rgs. <u>30E</u>	Is gas actually connected? <u>YES</u> When <u>June 23, 1981</u>

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.

Ken Johnson Ken Johnson  
(Signature)  
Production Records Supervisor  
January 24, 1986  
(Date)

OIL CONSERVATION DIVISION  
MAR 7 1986  
APPROVED \_\_\_\_\_ Original Signed By \_\_\_\_\_  
BY Les A. Clements  
Supervisor District II  
TITLE \_\_\_\_\_

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.

RECEIVED

JUN 24 1983

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
ARTESIA, OFFICE

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U.S.O.B.	
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OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

Operator Phillips Oil Company

Address P. O. Box 128, Loco Hills, New Mexico 88255

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Lease Name
Recompletion <input type="checkbox"/>	Maddren A
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name General American Oil Co. of Texas, P. O. Box 128, Loco Hills, NM 88255 and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Maddren-A Fed	4	Grayburg-Jackson SK Q-G-SA	State, Federal or Fed Federal	IC 053259-A
Location	B 330	North	1650	East
Unit Letter	:	Feet From The	Line and	Feet From The
Line of Section	28	T. and Range	17-S 30-E	NMPM, Eddy County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Company — Pipeline Division	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"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	Phillips Building Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	28	17S	30E	Yes	June 23, 1981

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

I. COMPLETION DATA

Designate Type of Completion — <input checked="" type="checkbox"/>	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some 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

I. 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
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 (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-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.

Lendell N. Hawkins  
Lendell N. Hawkins (Signature)  
Field Superintendent  
(Title)  
April 11, 1983  
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 28 1983, 19  
Original Signed By  
BY Leslie A. Clements  
Supervisor District II  
TITLE

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 multiple-completed wells.

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
RECEIVED

AUG 03 1981

O. C. D.  
ARTESIA, OFFICE

General American Oil Company of Texas /

Address  
P. O. Box 128 Loco Hills, New Mexico 88255

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

Change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Maddren "A"	Well No. 4	Pool Name, Including Formation Grayburg-Jackson	Kind of Lease Q-G-SA	Lease No. State, Federal or Fee Federal LC-053259-a
Location Unit Letter B ; 330 Feet From The North Line and 1650 Feet From The East Line of Section 28 Township 17-South Range 30-East, N.M.P.M., Eddy County				

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 — Pipeline Division	Address (Give address to which approved copy of this form is to be sent) North Freeman Avenue Artesia, N. M. 88255					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building Odessa, N. M. 79761					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 28	Twp. 17S	Rge. 30E	Is gas actually connected? YES	When June 23, 1981

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

COMPLETION DATA

Designate Type of Completion — (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Festival	Diff. Festival
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

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
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 (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Lendell N. Hawkins  
Lendell N. Hawkins (Signature)  
Field Superintendent

(Title)

July 30, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 03 1981, 19  
BY N.A. Gressitt  
TITLE SUPERVISOR, DISTRICT II

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