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ARTESIA, OFFICE

Form C-104
Revised 10-01-78
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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

POOL NUMBER RECEIVED	
DISTRIBUTION	
SANTA FE	☒
FILE	☒
U.I.C.A.	
LAND OFFICE	
TRANSPORTER	☒
CAT.	☒
OPERATOR	☒
PRODUCTION OFFICE	

I.

Operator Phillips Petroleum Company

Address Room 401, 4001 Penbrook St., Odessa, TX 79762

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:	
☐ Recompletion	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas	☐ Condensate

Other (Please explain):

If change of ownership give name and address of previous owner Phillips Oil Co.

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Keely - A Fed</u>	Well No. <u>29</u>	Pool Name, including Formation <u>San Andres Grayburg-Jackson (SR-Q-GB-SA)</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>028784A</u>
Location				
Unit Letter <u>B</u>	<u>1300'</u>	Feet From The <u>North</u> Line and <u>1500</u>	Feet From The <u>East</u>	
Line of Section <u>24</u>	Township <u>17-S</u>	Range <u>29-E</u>	<u>NMPM</u>	<u>Eddy</u>

Post ID-3
9-6-85
Chg Op Name

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Navajo Refining</u>	<u>Box 159, Artesia, NM 88210</u>
Name of Authorized Transporter of Casinghead Gas: ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Co.</u>	<u>4001 Penbrook St., Odessa, TX 79762</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When.
<u>Unit K</u> <u>Sec. 24</u> <u>Twp. 17-S</u> <u>Rge. 24-E</u>	<u>Yes</u> <u>8-12-85</u>

Post ID-2
9-13-85
Sam + BR

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.

W. J. Mueller
(Signature)
Senior Engineering Specialist
(Title)
8-26-85
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 10 1985, 19

BY Les A. Clements
Original Signed By
Supervisor District II

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 condition.

Separate Forms C-104 must be filed for each pool in multiple completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res.	Drill Res.
Date Spudded 10/23/84	Date Compl. Ready to Prod. 6/2/85	Total Depth 3400			P.B.T.D. 3363			
Elevations (DF, RKB, RT, GR, etc.) 3606 GL, 3616 KB	Name of Producing Formation Grayburg-Jackson	Top Oil/Gas Pay 2384			Tubing Depth 3315			
Perforations Perf'd 4½" csg. w/3 1/8" gun 2384-3356 - 116 shots					Depth Casing Shoe 3400			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12½	8 5/8		354		1350 sk "C" w/2% CaCl			
					1 Circ. 83 sk			
7 7/8	4 1/2		3400		1400 sk "C" w/5% /sk sa			
			1300 sk TLW 10% Diace		D, 100 sk "C" w/4% CaCl			
			Circ. 185 sk					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 6/12/85	Date of Test 8/21/85	Producing Method (Flow, pump, gas lift, etc.) Pump		
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil - Bbls. 32.0	Water - Bbls. 51	Gas - MCF 35.8	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (Flow, pack pt.)	Tubing Pressure (Start-In)	Casing Pressure (End-In)	Choke Size