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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico sergy, Minerals and Natural Resources Departm....

RECEIVED

Form C-104
Revised 1-1-39
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

MAR 13'89

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

○. C. **D.**

1000 Rio Brazos Rd., Aztec, NM 87410 I.	REQUEST FOR ALLOWABLE AND AUTHORIZATION CORRESA, OFFICE TO TRANSPORT OIL AND NATURAL GAS								
Operator Phillips Petroleum	Company /	Weil AP 30-01			1 No. 15-25668				
4001 Penbrook St.,	Odessa, TX	79762							
Reason(s) for Filing (Check proper box) New Well Recompletion	Change in	Transporter of:	U Othe	t (Please expl	ain)				
Change in Operator If change of operator give name and address of previous operator	Casinghead Gas	Condensate			<u> </u>		<u></u>		
II. DESCRIPTION OF WELL	AND LEASE								
Lesse Name Keely-C Fed	Well No. Pool Name, Including 61 Grayburg J.					f Lease No. Federal or Fee LC - 028784 - A			
Location P Unit Letter	330	So Feet From The	uth Line	660	· For	E & From The	st	Line	
Section 24 Township	17-S	Range 29-E	, NIV	IPM,	Eddy			County	
III. DESIGNATION OF TRANS	SPORTER OF O		RAL GAS	address to w	hich approved	copy of this form	is to be se	nt)	
Navajo Refining		la da la			8210				
Name of Authorized Transporter of Casing Phillips 66 Natural G	as Company	Address (Give address to which approved 4001 Penbrook St., Ode Is gas actually connected? When			ssa, TX 79762				
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 17S 29E	Yes	connected?	Wiles	<u> </u>	2/18/8	8	
If this production is commingled with that f IV. COMPLETION DATA			·						
Designate Type of Completion -	XX	i	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Date Spudded 11/26/86*	Date Compl. Ready to Frod. 12/18/88		Total Depth 6900* Top Oil/Gas Pay			P.B.T.D. 62931			
Elevations (DF, RKB, RT, GR, etc.) 3610.8 GR Perforations	Name of Producing F 7R-Q-SA	2436			Tubing Depth 3582				
04061 05541				burg Deep Unit #9			6900'*		
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
17-1/2"	13-3/8"		3721			500 sk C Port 10-2			
	8-5/8"		3500'			1100 sk C 3-17-89. 550 sk C compt BK			
7-7/8"	5-1/2" 2 <i>3/</i> 2		3582			550 SK C comp+ BK			
V. TEST DATA AND REQUES OIL WELL (Test must be after re		ABLE			lowable for this	depth or be for	full 24 hou	rs.)	
Date First New Oil Run To Tank		ump, gas lift, e							
12/18/88	3/6/89		DUMD Casing Pressure			Choke Size			
Length of Test 24 hrs.	Tubing Pressure	· · · · · · · · · · · · · · · · · · ·				Gas- MCF			
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			66			
GAS WELL						10 : 10			
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pilot, best pr.)	Tubing Pressure (Sho	Casing Pressure (Shul-in)			Choke Size				
VI. OPERATOR 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			OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.				Date Approved MAR 1 8 1989					
Signature L.M. Sanders, Supervisor, & Proration				By Original Signed By Mike Williams					
Printed Name 3/8/89 (915)367-1488					MIK	AAAIII			
Date		lephone No.							

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.

