DISTRIBUTION NEW MEXICO OIL CONSERVATION CL ISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1 ILE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL CASC E I V E D S.G.S. AND OFFICE TRANSPORTER GAS SEP 29 1975 OPERATOR PROPATION OFFICE Operator O. C. C. C. E. LaRue and B. N. Muncy, Jr. ~ ARTESIA, OFFICE Check proper box Artesia, New Mexico 88210 Other (Please explain) ew Well Change in Transporter of: Connection of Casinghead Gas Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease 4 McClay North Benson Queen State, Federal or Fee Federal Lecation Unit Letter_ 1980 __ Feet From The **South** _Line and __**660** Feet From The 34 Line of Section 185 Township 30E Range Eddy , NMPM, III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Casinghead Gas 🔀 or Dry Gas Address (Give address to which approved copy of this form is to be sent) Phillips Petroleum Company Bartlesville, Oklahoma 74004 If well produces oil or liquids, give location of tanks. P.ge. Is gas actually connected? G 33 30 18 Yes August 27. 1975 If this production is commingled with that from any other lease or pool, give commingling order number: **COMPLETION DATA** Oil Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) 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 SACKS CEMENT 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) OIL WELL Date First New Oil Run To Tanks 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 (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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. SUPERVISOR, DISTRICT II

<u>27,</u>

(Date)

1975

September

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.

Lease No. LC 028978(b)

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.