STRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE RECEIVED TRANSPORTER GAS OPERATOR DFC 1 3 1973 PRORATION OFFICE O. C. C. Phillips Petroleum Company 🗡 ARTESIA, OFFICE Phillips Building, Odessa, Texas 79761 s) for filing (Check proper box) Other (Please explain) Change in Transporter of: New Well Oil Dry Gas Also, lease name change. Change in Ownership XCondensate Casinghead Gas If change of ownership give name El Paso Products, P.O. Box 3986, Odessa, Texas 79760 and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Lease No. Kind of Lease State. Federal as LC029358 8 Lusk-Strawn Lusk Deep Unit-1650 Feet From The South Line and 990 East Feet From The 31-E , NMPM, Fddv Township 19-S Range Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil X P.O. Box 1183, Houston, Texas 77001 Address (Give address to which approved copy of this form is to be sent) The Permian Corp. Name of Authorized Transporter of Casinghead Gas 🔀 💮 or Dry Gas 🗔 Phillips Building, Odessa, Texas 79761 Phillips Petroleum Company Twp. P.ge. If well produces oil or liquids, В ; 19 19-S; 32-E Yes at completion If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Resty, Diff. Resty. New Well Workover Plug Back Oil Well Gas Well Designate Type of Completion - (X) P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded Name of Producing Formation Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Casing Pressure Choke Size Tubing Pressure Length of Test Water - Bbis. Actual Prod. During Test Oil-Bbls.

GAS WELL Gravity of Condensate Bbla. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.)

VI. 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.

(Signature) E. M. Ball, Production Clerical Supervisor

(Title)

1973 December 11. (Date)

OIL CONSERVATION COMMISSION

DEC 1 3 1973 APPROVED

OIL AND GAS INSPECTOR 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 allow-sble 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.