

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator PHILLIPS PETROLEUM COMPANY		Well API No. 30-015-26678
Address 4001 Penbrook St., Odessa, Texas 79762		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

RECEIVED
DEC 10 1991
Casinghead Gas MUST NOT
FLARED AFTER 3/27/92
UNLESS AN EXCEPTION FROM
ARTESIA OFFICE THE B. L. M. IS OBTAINED

II. DESCRIPTION OF WELL AND LEASE

Lease Name Peak View	Well No. 1	Pool Name, Including Formation Cabin Lake (Delaware)	Kind of Lease State, Federal or Fee	Lease No. NM 70333
Location Unit Letter P : 660 Feet From The South Line and 330 Feet From The East Line Section 35 Township 21-S Range 30-E, NMPM, Eddy 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"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79999
If well produces oil or liquids, give location of tanks.	Unit P Sec. 35 Twp. 21-S Rge. 30-E Is gas actually connected? No When?

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5/7/91	Date Compl. Ready to Prod. 9/24/91	Total Depth 7875'	P.B.T.D. 7450'					
Elevations (DF, RKB, RT, GR, etc.) 3216.1' GR; 32228.1 KB	Name of Producing Formation Delaware	Top Oil/Gas Pay 6250'	Tubing Depth 6096'					
Perforations 6250'-7336'	Depth Casing Shoe 7540'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	393'	800 sk C					
12-1/4"	8-5/8"	3497'	1600 sk C					
7-7/8"	5-1/2"	7540'	400 C Neat & 750 C & Neat					
	2-7/8"	6096'	st stage 2 stage					

V. 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 Tank 9/24/91	Date of Test 11/14/91	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size 1-31-92
Actual Prod. During Test	Oil - Bbls. 32	Water - Bbls. 212	Gas - MCF 28

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

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 is true and complete to the best of my knowledge and belief.

Signature L. M. Sanders
L. M. Sanders, Supervisor, Regulation & Proration
Printed Name
Date 12/6/91 Telephone No. (915) 368-1667

OIL CONSERVATION DIVISION

JAN 23 1992

Date Approved
By ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II
Title

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.