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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
**RECEIVED**

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

DEC 1 1972

I. Operator  
**Phillips Petroleum Company** **P. C. C.**  
Address **ARTESIA OFFICE**  
**Room 711, Phillips Building, Odessa, Texas 79761**  
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Drag-A</b>	Well No. <b>1</b>	Pool Name, including Formation <b>Carlsbad, So. (Atoka)--Gas</b>	Kind of Lease <b>///, Federal///</b>	Lease No. <b>NM0540701-A</b>
Location Unit Letter: <b>C</b> ; <b>660</b> Feet From The <b>north</b> Line and <b>1980</b> Feet From The <b>west</b> Line of Section <b>18</b> Township <b>23-S</b> Range <b>27-E</b> , NMPM, <b>Eddy</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
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Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>El Paso Natural Gas Company</b>	<b>Box 1492, El Paso, Texas</b>	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
		Is gas actually connected? <b>Yes</b> When <b>29 11-28-72</b>

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<b>X</b>	<b>X</b>					
Date Spudded <b>3-22-72</b>	Date Compl. Ready to Prod. <b>5-16-72</b>		Total Depth <b>11,875</b>		P.B.T.D. <b>11,806</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>3217' Gr., 3237' DF</b>	Name of Producing Formation <b>Atoka</b>		Top Oil/Gas Pay <b>10,626</b>		Produced through tbg./csg. annulus			
Perforations <b>10,688-91', 10,694-97', 10,744-50', 10,794-99'</b>					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>17-1/2"</b>	<b>13-3/8"</b>		<b>370' (450 sx Class H w/2% CaCl2. Circ 30 sx)</b>					
<b>11"</b>	<b>8-5/8"</b>		<b>5468' (1000 sx Tr. LW, 250 sx Class H. TOC @ 2150')</b>					
<b>7-7/8"</b>	<b>5-1/2"</b>		<b>11,875' (550 sx Class H w/3/4% CFR2 &amp; 8# salt/s TOC at 7950')</b>					

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)

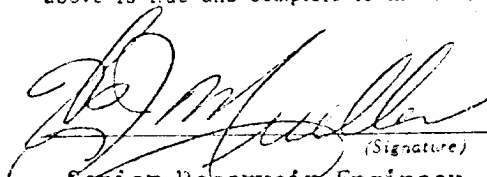
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
---	---	---	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
---	---	---	---
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
---	---	---	---

GAS WELL See Form C-122, test date 5-25-72.

Actual Prod. Test-MCF/D <b>CAOF 2209</b>	Length of Test <b>---</b>	Bbls. Condensate/MMCF <b>---</b>	Gravity of Condensate <b>---</b>
Testing Method (prior, back pr.) <b>Back pressure</b>	Tubing Pressure (shut-in) <b>4698</b>	Casing Pressure (shut-in) <b>4085</b>	Choke Size <b>Various</b>

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.

  
**W. J. Mueller**  
(Signature)  
**Senior Reservoir Engineer**  
(Title)

**November 28, 1972**  
(Date)

OIL CONSERVATION COMMISSION

**DEC 1 1972**  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY **W. A. Gressett**  
TITLE **OIL AND GAS INSPECTOR**

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 the purpose of obtaining well name or number, or transporter or other data on a well of constant production.

Separate Forms C-104 must be filed for each pool in a well.