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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

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

ABSTRACTION TO TRANSPORT OIL AND NATURAL GAS

DEC 1 1972

O. C. C.

Operator Phillips Petroleum Company	
Address Room 711, Phillips Building, Odessa, Texas 79761	
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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Drag-B	Well No. 1	Pool Name, including Formation Carlsbad, So. (Morrow)--Gas	Kind of Lease Federal	Lease No. NM 0275360
Location Unit Letter: K, 1980 Feet From The south Line and 1980 Feet From The west				
Line of Section: 18 Township: 23--S Range: 27-E, NMCM, Eddy 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)					
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)					
El Paso Natural Gas Company	Box 1492, El Paso, Texas					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	11-28-72

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.
		X	X					
Date Spudded 5-25-72	Date Compl. Ready to Prod. 8-2-72	Total Depth 12,041'	P.B.T.D. 11,970'					
Elevations (DF, RKB, RT, GR, etc.) 3217' Gr., 3237' DF	Name of Producing Formation Morrow	Top Oil/Gas Pay 11,424'	Tubing Depth 11,383'					
Perforations 11,718-21', 11,702-09', 11,686-90', 11,668-74', 11,468-78'			Depth Casing Shoe 12,040'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/4"	13-3/8"	369' (425 sx Class H. Circ 100 sx)	1900					
11"	8-5/8"	5450' (1300 sx Tr. LW, 250 sx Class H) TOC @ /						
7-7/8"	5-1/2"	12040' (550 sx Class H w/3/16 CFR2 and 8# salt/						
	2-7/8"	11383' Temp survey TOC at 7800')						

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)

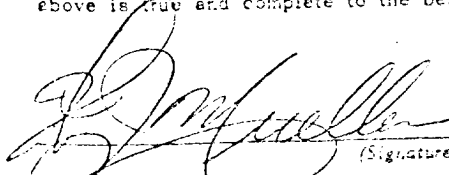
Date First New Oil Run To Tanks --	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test --	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls	Water-Bbls	Gas-MCF

GAS WELL See Form C-122 with test date 8-7-72.

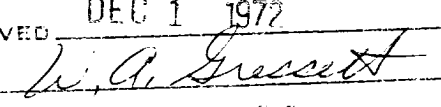
Actual Prod. Test-MCF/D 14,672 (CAOF) 18/76	Length of Test 4 hrs.	Bbls. Condensate/MMCF --	Gravity of Condensate --
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 4251	Casing Pressure (Shut-in) 4874	Choke Size Various

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
Senior Reservoir Engineer
November 28, 1972

OIL CONSERVATION COMMISSION

APPROVED DEC 1 1972
BY 
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 a well with a well name or number, or transporter or other well identification.

Separate Forms C-104 must be filed for each well in multiple completions.