

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

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

RECEIVED

NOV 19 1981

API No. 30-015-23696

O. C. D.

Operator Phillips Petroleum Company		ARTESIA, OFFICE	
Address Rm 401, 4001 Penbrook Street, Odessa, TX 79762			
Reason(s) for filing (Check proper box)		Other (Please explain)	
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"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Malaga C	Well No. 1	Pool Name, Including Formation South Culebra Bluff Atoka Gas	Kind of Lease State, Federal or Fee	Lease No. L-5364
Location Unit Letter E ; 1980 Feet From The North Line and 660 Feet From The West Line of Section 36 Township 23-S Range 28-E, NMPM, 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"/> NA	Address (Give address to which approved copy of this form is to be sent) NA					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 36	Twp. 23S	Rge. 28E	Is gas actually connected? No	When 7/30/82

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.
		XXX	XXX					
Date Spudded 3-28-81	Date Compl. Ready to Prod. 10-27-81	Total Depth 9-7-81 13,472	P.B.T.D. 13,472					
Elevations (DF, RKB, RT, GR, etc.) 2990 GR, 3013 KB	Name of Producing Formation Atoka	Top Oil/Gas Pay 11,737 11781	Tubing Depth 11,687					
Perforations 11781'-11823' 13'--26 shots			Depth Casing Shoe 13,471					
* Continued on back TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
24"	18-5/8"	450'	850 sxs Cl "C" w/2%					
		(CaCl ₂ & 1/4# Flocele/sx.	Circ 20 sxs)					
17 1/2"	13-3/8"	2700'	2000 sxs TLW w/10%					
(DD, 10% salt, 1/4# Flocele; followed w/300 sxs			Cl "C" w/2% CaCl ₂ . Circ 420 sxs					

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

Actual Prod. Test - MCF/D 1370	Length of Test 1	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) back pressure	Tubing Pressure (Shut-in) 1940	Casing Pressure (Shut-in) packer	Choke Size 10/64

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 Engineering Specialist

November 12, 1981

OIL CONSERVATION COMMISSION

APPROVED AUG 18 1982
BY Leslie A. Clement
TITLE SUPERVISOR, DISTRICT II

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 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.