IERGY AND MINERALS DEPART	MENT				RECEIVED		
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DISTRIBUTION	1				NOV 20 '87	Format 06-01-8	
SANTA FE		OIL CONS	SERVAT	ION DIVISION		Page 1	
FILE VV	1		P.O.BOX	2088	0. C. D.		
U.S.G.S.	4	SANTA F	E, NEW N	AEXICO 87501	ARTESHA OFFICE		
LAND OFFICE	_				ANDIDIM, CONCE		
	-	R	FOUEST	OR ALLOWABLE			
OPERATOR	-			AND			
		ORIZATION	TO TRAI	NSPORT OIL AND N	ATURAL GAS		
•							v
Operator Phillips Petroleum Con							
Philips Petroleum Con							·
Address 4001 Penbrook St., Od	essa, TX 79762						
Reason(s) for filing (Check proper bo		<u> </u>		·····	Other (Please expla	ain)	
_		Change in Ti	ransnorter	of:			
X New Well				Dry Gas			
Recompletion     Change in Ownership		Oil Casing	ghead Gas	Condensate			
L Change in Ownership							
.ease Name Ja <b>mes</b> -A	Well No. 4	Pool Name, Cabin Lak	-		Kind of Lease State, Federal State	or Fee	Lease K-3271
Location		d			1	<u> </u>	
Unit Letter	980 Feet Fro	m The <u>No</u> r	rth i	ine and	Feet Fro	m The <u>East</u>	
Line of Section 2	Township 22-S		Range	30-E	, NMPM,	Edd	y Cour
III. DESIGNATION OF TRAI			TURALG	AS Address (Give address	s to which approved (	copy of this form i	s to be sent)
Name of Authorized Transporter of							,
Phillips Petroleum Company					St., Odessa, TX. 7		
Name of Authorized Transporter of	Casinghead Gas	] or Dry	Gas 📋	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Co.			<u> </u>		El Paso, TX 79999		or th
If well produces oil or liquids,	Unit Sec.	Twp.	Rge.   30E	is gas actually connec	cted?	1 10/01/07	12-11-5
give location of tanks.		1 2 2 3		Yes		1 10/21/8/	comp of B
If this production is commingled	with that from an	v other lease	or pool, a	ive comminaling order	r number:		/
In this production is commigree i		,		<b>J</b>			
NOTE: Complete Parts IV and	d V on reverse s	ide if neces	isary.	0			
					IL CONSERVATIO		
VI.CERTIFICATE OF	CUMPLIANC	Ľ		APPROVED	NOV 3 0	1987	, 19
I hereby certify that the rules and regulations	of the Oil Conservation D	ivision have				<u></u>	
been complied with and that the information my knowledge and belief.	given is true and complet	e to the best of		BY	Original Sid	aned By	
					Mike Wi	lliams	
				TITLE	Oil & Gas	Inspector	
N h. l . l	1						
X Vileell		Aueller		1(	is to be filed in comp request for allowabl		
	WW.J.N			11 11 11 15 15 2	IEUUESCIUT AIIUWAUI		

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STATE OF NEW MEXICO

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(Signature)

(Title)

(Date)

Engineering Supervisor - Reservoir

November 17, 1987

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-able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for cahnges of owner, well name or number, or transporter, or other such change of condition

بغير فيدانون

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## IV. COMPLETION DATA

Designate Type of Complet	tion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7/9/87	Date Comp 10/21/87	mpl. Ready to Prod 187		Total Depth 7480		Р.В.Т.D. 7286			
Elevations (DF, RKB, RT, GR, etc.) 3194 DF; 3183 GR	Name of Producing Formation Delaware			Top Oil/Gas Pay 5834- 568 -		Tubing Depth 6320			
Perforations 6220'-6230;' 6232'-6241'; 5948'-5'	970'; 5834'-58	338'; 5866'-5	882'; 5888'-5				Depth Cas 7461'	ing Shoe	
	Ţ	UBING, C	ASING, AND	CEMENTI	NG RECOR	D			
HOLE SIZE	CASI	NG & TUBIN	G SIZE		DEPTH SET		SACKS CEMENT		INT
17-1/2		13-3/8			410'		650 Sk C		
12-1/4		8-5/8			3500'		1200 Sk C		
7-7/8		<u>5-1/2</u>			7461'			1000 Sk C	

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-OIL WELL of this depth or be for full 24 hours.)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, p	Producing Method (Flow, pump, gas lift, etc.)		
10/21/87	11/13/87	Pumping	Pumping		
Length of Test 24 Hrs.	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
	53	216	30.1		

## 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