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State of New Mexico Energy, Minerals and Natural Resources Department

RECEIVED

OIL CONSERVATION DIVISION

NOV 2 0 1992

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DISTRICT II P.O. Drawer DD, Artesia, NM 88210	·			P.O. Bo	ox 2088 exico 8750	M 2088	NO	√ 2 0 19 3 = 5	92		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	DEOL		•				- A	J. C. D.	£		
I		_				AUTHORIZ FURAL GA	S				
Operator Phillips Petroleum	Company						Well API No. 30-015-26371				
Address 4001 Penbrook Stre	at O	docca	То	Y 00	79762			<u> </u>	<i></i>		
Reason(s) for Filing (Check proper box)	, 0	uessa	, 16	xas		T (Please expla	in)				
New Well	0.1	Change in		F1	Eff	ective	Date 1	10-13-9	92		
Recompletion	Oil Casinghes	di Gas 🏋	Dry Gas Condens	_					-		
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASE									
Lease Name	Well No. Pool Name, Including Formati				on Kind of Lease Lease No. 1 SSEE Federal of Real N.M. 0479				Lease No. 0479142		
James E Fed		4	Cab	in La	ke (Del	.aware)	/SCH6, 1	Pederal OCAES	IX IVII	04/9142	
Unit Letter A	: 760		Feet Fro	om The	NorthLine	and33(Fe	et From The	East	Line	
Section 11 Townshir	. 22 0		Danas	20 E	N/A	m.		T 1 1		Country	
Section 11 Township	22-S		Kange	30-E	, No	иРМ,		Eddy		County	
III. DESIGNATION OF TRAN		R OF OI		NATU	RAL GAS	e address to wh	ich groomed	come of this f	nem is to be	rent)	
Phillips Petroleum	X Comp		Į.	 k	1	ox 791,		• • • •			
Name of Authorized Transporter of Casing	head Gas	Å	or Dry (Gas	Address (Give	e address to wh	ich approved	copy of this fo	orm is to be	sent)	
Llano, Inc. If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	:	Sanger	Hobb When	_	88240)	
give location of tanks.	В	11	22-S	130-E	Yes 12-21-90						
If this production is commingled with that f IV. COMPLETION DATA	from any oth	er lease or p	pool, give	e commingl	ing order numb	xer:					
Designate Type of Completion	<u>(%)</u>	Oil Well	G	las Well	New Well	Workover	Deepen	Plug Back	Same Res'	v Diff Res'v	
Designate Type of Completion - Date Spudded		pl. Ready to	Prod.		Total Depth			P.B.T.D.	<u> </u>	<u> </u>	
•					•						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth				
Perforations	1			······································	1			Depth Casin	g Shoe		
	-	TIDINIC	CASIN	'C AND	CEMENTITY	VC PECOP					
HOLE SIZE		SING & TU			CEMENTI	NG RECOR	<u> </u>		SACKS CE	MENT	
V. TEST DATA AND REQUES OIL WELL (Test must be after ri				र्थ उक्त सम्बद्ध	he equal to on	exceed top allo	wable for this	depth or be t	for full 24 h	ours.)	
Date First New Oil Run To Tank	Date of Te		0, 10.2. 0			ethod (Flow, pu					
Lood of Tod	Tubina Pro				Casing Pressure			Choke Size			
Length of Test	Tubing Pro	SETIE			Casing Piesenie						
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF				
GAS WELL							-				
Actual Prod. Test - MCF/D	Length of	Test			Bbis. Conden	sate/MMCF		Gravity of C	condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
VL OPERATOR CERTIFIC				CE		OIL CON	CEDV	ATION!	טואופי		
I hereby certify that the rules and regular Division have been complied with and is true and complete to the best of my la	that the info	rmation give					NO	V 2 3 19		ON	
S.M. Sandus				Date Approved							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name

Date

11-18-92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

MIKE WILLIAMS

SUPERVISOR, DISTRICT IT

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

368-1488

- 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.