

OIL CONSERVATION DIVISION

DRAWER DD

ARTESIA NM

DISTRICT OFFICE II

July thru December 1991

NO. 2136 N/2

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 12-26-91

PURPOSE ALLOWABLE ASSIGNMENT - NEW OIL

Effective December 1, 1991 an allowable for a marginal (M) well is hereby assigned to Phillips Pet. Co., Livingston Ridge Federal #4-D-1-22-30 in the Cabin Lake Delaware Pool.

L - P

GP - P

MS/ma

Phillips Pet. Co.

EP  
EPN

OIL CONSERVATION DIVISION

*Mike Williams*

DISTRICT SUPERVISOR

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op

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator PHILLIPS PETROLEUM COMPANY		Well API No. 30-015-26429
Address 4001 Penbrook St., Odessa, Texas 79762		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>	RECEIVED
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator DEC 10 1991		

II. DESCRIPTION OF WELL AND LEASE

O. C. D.

Lease Name Livingston Ridge Fed	Well No. 4	Pool Name, including Formation Cabin Lake (Delaware)	Kind of Lease State, Federal or Fee	Lease No. NM 70335
Location Unit Letter D : 430 Feet From The North Line and 860 Feet From The West Line Section 1 Township 22-S Range 30-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St. Odessa, TX 79762					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79999					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 1	Twp. 22S	Rge. 30E	Is gas actually connected? Yes	When? 10/4/91

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 4/15/91	Date Compl. Ready to Prod. 7/13/91		Total Depth 7675'		P.B.T.D. 7675'			
Elevations (DF, RKB, RT, GR, etc.) 3300.4' GL; 3312.4' KB	Name of Producing Formation Delaware		Top Oil/Gas Pay 5890'		Tubing Depth 7226'			
Perforations 5890'-7558'					Depth Casing Shoe 7675'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		482'		800 sk C			
12-1/4"	8-5/8"		3700'		1700 sk C			
7-7/8"	5-1/2"		7675'		700 sk C & 600 C Neat			
	2-7/8"		7226'					

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 Tank 7/13/91	Date of Test 11/30/91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size comp & BK
Actual Prod. During Test	Oil - Bbls. 44	Water - Bbls. 208	Gas- MCF 32

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature  
E. M. Sanders, Supervisor, Proration  
Printed Name  
12/6/91  
Date  
Title  
(915) 368-1667  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved  
DEC 26 1991

By  
ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title  
SUPERVISOR, DISTRICT II

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.