

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

RECEIVED

FEB 10 1992

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GASO. C. D.
ARTESIA OFFICE

Operator PHILLIPS PETROLEUM COMPANY	Well APN No. 30-015-26644
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"/>	CASINGHEAD GAS MUST NOT BE
Recompletion <input type="checkbox"/>	FLARED AFTER 5/2/92
Change in Operator <input type="checkbox"/>	UNLESS AN EXCEPTION FROM
THE B. L. M. IS OBTAINED	

II. DESCRIPTION OF WELL AND LEASE

Lease Name James E	Well No. 12	Pool Name, Including Formation Cabin Lake (Delaware)	Kind of Lease State, Federal or Fee	Lease No. NM 0479142
Location Unit Letter C : 660 Feet From The N Line and 1980 Feet From The W Line Section 12 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 Pet. Co. Trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	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 E Sec. 12 Twp. 22S Rge. 30E	Is gas actually connected? No	When? Building tank battery & waiting on connection

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 9/14/91	Date Compl. Ready to Prod. 11/16/91		Total Depth 7750'			P.B.T.D. 7750'		
Elevations (DF, RKB, RT, GR, etc.) 3324' GL; 3336' KB	Name of Producing Formation Delaware		Top Oil/Gas Pay 7392'			Tubing Depth 7380'		
Perforations 7392'-7516' Delaware						Depth Casing Shoe 7750'		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		478'		800 sk C			
12-1/4"	8-5/8"		3700'		1800 sk C			
7-7/8"	5-1/2"		7750'		600 sk C 1st stage &			
	2-7/8"		7380'		500 sk C 2nd stage			

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 11/16/91	Date of Test 1/05/92	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size 3-6-92
Actual Prod. During Test	Oil - Bbls. 19	Water - Bbls. 250	Gas - MCF 100

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 L. M. Sanders, Supervisor Regulation &
Printed Name L. M. Sanders, Supervisor Permit on
Date 2/7/92 (915) 368-1667
Telephone No.

OIL CONSERVATION DIVISION

FEB 28 1992

Date Approved

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 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.