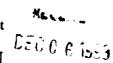
Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department



at Bottom of Pag

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

I.	7	OTRAN	IŞPORT OIL	AND NA	TURAL G	AS				
Operator Phillips Petrole				Well API No. 30-015-26644						
Address 4001 Penbrook St	reet, 0	dessa	, TX 797	62						
Reason(s) for Filing (Check proper box)				X Oth	eτ (Please expl	zin)				
New Well			ransporter of:	Scurloc	k Perm	ian (P	rimarv)		
Recompletion	Oil Casinghead	_	Ory Gas Condensate	Phillip	s Petro	oleum (Co.(Tri	ucks)(A	lternat	
change of operator give name	CHENGALO	- C						acks) (I	ricernat	
nd address of previous operator									 .	
I. DESCRIPTION OF WELI					·					
Lease Name James E Fede	ral	Well No. F	ool Name, Included Cabin L.		1 222220		of Lease Federal <u>proF</u> e		ease No. 79142	
Location		<u></u>		are (De	- Iawale			211104	7 7 1 4 2	
Unit LetterC		F	eet From The N	orth Lin	e and198	3:0 F e	et From The	Wes	t Line	
Section 12 Towns	00a									
Section 12 Towns	hip 22S_	<u>k</u>	tange 301	Ľ, N	мем, Ес	ldy			County	
II. DESIGNATION OF TRA	NSPORTE	R OF OIL	AND NATU	RAL GAS						
Name of Authorized Transporter of Oil	XX. 1	or Condensa	te 🗆	1	e address to wi					
Scurlock Permian Corp. Name of Authorized Transporter of Casinghead Gas X or Dry Gas					Box 464	+ <u>8. Ho</u> ₁	copy of this form is to be sent)			
Llano, Inc.	ngives one	[X] •	i Diy Gas	921 W.			os, NM		ent)	
f well produces oil or liquids,			wp. Rge.			When		00240		
ve location of tanks.	E		22S 30E	Yes			8-3-9	92		
this production is commingled with the V. COMPLETION DATA	t from any othe	r lease or po	ol, give comming	ling order numl	ber:					
		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u> </u>	_L		<u> </u>	<u>i</u>				
Pate Spudded	Date Compl	. Ready to P	rod.	Total Depth			P.B.T.D.			
levations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Form	nation	Top Oil/Gas	Pay		Tubing Dep	uh		
								Tuoing Depart		
Perforations								Depth Casing Shoe		
	71	IRING C	'ASING AND	CEMENTI	NG PECOP	<u>n</u>	<u> </u>			
HOLE SIZE					CEMENTING RECORD DEPTH SET			SACKS CEMENT		
								Post ID-3		
		-				· · · · · · · · · · · · · · · · · · ·		1-7-9	4	
		·					H	April T	SPC	
. TEST DATA AND REQUE	ST FOR A	LLOWAI	BLE	1				_ y ·	_ PC	
IL WELL (Test must be after			load oil and must					for full 24 hou	rs.)	
Pate First New Oil Run To Tank	Date of Test	!		Producing Me	ethod (Flow, pu	mp, gas lift, e	tc.)			
ength of Test	Tubing Pres	sure		Casing Pressu	ıre		Choke Size			
ctual Prod. During Test	Ouring Test Oil - Bbls.			Water - Bbls.			Gas- MCF			
			<u> </u>			******	<u> </u>			
GAS WELL Actual Prod. Test - MCF/D	Length of T	est		Bbls, Conden	sate/MMCF		Gravity of C	Condenesta		
							Sitting of Concentration			
ng Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
T 0000 1 000 000							<u> </u>			
I. OPERATOR CERTIFIC	_				DIL CON	ISERV	MOITA	DIVISIO	M	
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.							111011	D1 1 1010	214	
					Date ApprovedDEC 2 9 1993					
KOXI XI.	0.				• •					
Signature		<u> </u>		By_		-	R. DISTRI	icī II	· · · · · · · · · · · · · · · · · · ·	
K. R. Oberle, Coo	ordinate				SUP	ERVISO	C, DIST			
Printed Name December 2, 1993	(91	5) 368	ide 3-1675	Title						
Date			ione No.							

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.