

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. 30-015-26830
Address 4001 Penbrook 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: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	REQUEST TESTING ALLOWABLE OF 1800 BO
Recompletion <input type="checkbox"/>		
Change in Operator <input type="checkbox"/>		

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Molly State	Well No. 2	Pool Name, Including Formation Livingston Ridge (Delaware)	Kind of Lease State Federal no Fee	Lease No. NM-V- 3605
Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 1 Township 22-S Range 31-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"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company Trucks	4001 Penbrook Street, Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 1492, El Paso, Texas 79999
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?
C 1 22S 31E	No

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9-26-91	Date Compl. Ready to Prod. 11-21-91	Total Depth 8425'	P.B.T.D. 8346'					
Elevations (DF, RKB, RT, GR, etc.) 3584.6 KB - 3567.6 GL	Name of Producing Formation Delaware	Top Oil/Gas Pay 7060	Tubing Depth 7050'					
Perforations 7060, 7062, 7064, 7066, 7078, 7070, 7072, 7074, 7076, 7078, 7080, 7082, 7084, 7086, 7088, 7090, 7092, 7094, 7096, 7098, 7100', Total 21 Shots	TUBING, CASING AND CEMENTING RECORD		Depth Casing Shoe 8425'					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	863'	1289 sx Class "C"					
12-2/4"	8-5/8"	4500'	1735 sx Class "C"					
7-7/8"	5-1/2"	8425'	1600 sx Diacel "D", 1st & 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 11-21-91	Date of Test 11-27-91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 95	Water - Bbls. 166	Gas- MCF 143

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 Reg/Proration
Printed Name Title
1-2-92 (915) 368-1488
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 3 1992

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.