

OIL CONSERVATION DIVISION

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

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

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. 30-039-24731
Address 300 W. Arrington, Suite 200, Farmington, NM 87401	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If changes of operator give name and address of previous operator \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-5 Unit	Well No. 216	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease Sum, Partial or Fee <input checked="" type="radio"/>	Lease No.
Location Unit Letter <u>L</u> : <u>1743</u> Feet From The <u>South</u> Line and <u>1192</u> Feet From The <u>West</u> Line Section <u>33</u> Township <u>29N</u> Range <u>5W</u> , <u>NMPM</u> Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 58900, Salt Lake City, Utah 84158					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When? Attn: Patt Rodgers

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
			XX					
Date Spudded 6-1-90	Date Compl. Ready to Prod. Perf'd 6-24-90		Total Depth 3468'		P.B.T.D. 3468'			
Elevations (DF, RKB, RT, GR, etc.) 6549' GL	Name of Producing Formation Fruitland		Top Oil/Gas Pay 3460' 3278'		Tubing Depth 3431'			
Perforations 3278'-3460'				Depth Casing Shoe				

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	9 5/8", 36#, K-55	286'	250SXC1B-Circ 115SX
8 3/4"	7", 23#, J-55	3263'	500SX 65/35 POZ + 150
6 1/8"	5 1/2", 23#, P110	3467'	not cemented
	2 3/8"	3431'	

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 N/A	Date of Test -----	Producing Method (Flow, pump, gas lift, etc.) -----
Length of Test -----	Tubing Pressure -----	Casing Pressure (Shut-in) -----
Actual Prod. During Test -----	Oil - Bbls. -----	Water - Bbls. -----

-AUG 07 1990

GAS WELL

Actual Prod. Test - MCF/D 480	Length of Test 1hr	Bbls. Condensate/MCF -----	Gravity of Condensate -----
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) 798	Casing Pressure (Shut-in) 800	Choke Size 2"

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  
A. J. Kiecke, Jr. Area Landman  
Printed Name  
8-8-90 Title  
Date (505) 599-3410 Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 09 1990

By ORIGINAL SIGNED BY ERNIE BUSCH

Title DEPUTY OIL & GAS INSPECTOR, DIST. #:

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.