

OIL CONSERVATION DIVISION

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

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. 30-039-24720
Address 300 West Arrington, Suite 200, Farmington, NM 87401		
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 type="checkbox"/>
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		

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 30-5 Unit	Well No. 211	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. NM-012331
Location Unit Letter B : 1083 Feet From The North Line and 1821 Feet From The East Line Section 31 Township 30N Range 5W, NMPM, 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, UT 84108	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Typ.	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 X	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 6-5-90	Date Compl. Ready to Prod. Perf'd 7-4-90		Total Depth 3667'		P.B.T.D. 3666'			
Elevations (DF, RKB, RT, GR, etc.) 6908' GL	Name of Producing Formation Fruitland		Top Oil/Gas Pay 3558'		Tubing Depth 3624'			
Perforations 3558' - 3666'					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9-5/8", 36#, K-55	325.53"	250 SX Cl'B'-Circ 22 Bols
8 3/4"	7", 23#, J-55	3531'	500 SX 65/35 POZ-150 SX Cl'B'
6 1/8"	5 1/2", 23#, P-110	3666'	Circ 45 SX
	2-3/8", 4.7#, J-55	3624'	None

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, etc.) --
Length of Test --	Tubing Pressure --	Casing Pressure --
Actual Prod. During Test --	Oil - Bbls. --	Water - Bbls. --
		Gas - MCF --

GAS WELL

Actual Prod. Test - MCF/D 2573	Length of Test 1 hr.	Bbls. Condensate/Water 10 / wtr	Gravity of Condensate
Testing Method (pilot, back pr.) Pitot	Tubing Pressure (Shut-in) 1500	Casing Pressure (Shut-in) 1560	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
R.A. Allred
Drilling Supervisor
Printed Name
September 12, 1990 (505) 599-3403
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 01 1990
By ORIGINAL SIGNED BY ERNIE BUSCH
Title DEPUTY OIL & GAS SUPERVISOR, DIST. 3

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.