

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator PHILLIPS PETROLEUM COMPANY	Well AM No. 30-045-28347
Address 5525 Hwy 64 NBU 3004, 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: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	

If change of operator give name and address of previous operator

*Northwest Pipeline Corp, 300 W. Livingston, Suite 0-200  
Farmington, nm 87401*

II. DESCRIPTION OF WELL AND LEASE

Lease Name SAN JUAN 32-7 UNIT	Well No. 229	Pool Name, Including Formation BASIN FRUITLAND COAL	Kind of Lease State, Federal or Tax	Lease No. SF-078998
Location Unit Letter <u>B</u> : 1026 Feet From The <u>North</u> Line and <u>1793</u> Feet From The <u>East</u> Line Section <u>9</u> Township <u>31N</u> Range <u>7W</u> , <u>NMPM</u> San Juan 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"/> WILLIAMS FIELD SERVICES CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 58900, SALT LAKE CITY, UT 84158-0900	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Top.	Rge.
	Is gas actually connected? When? ATTN: CLAIRE POTTER	

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 Resv	Diff Resv
		X	X					
Date Spudded 10-29-90	Date Compl. Ready to Prod. Perf'd 6-29-91		Total Depth 3482'		P.B.T.D. 3480'			
Elevations (DF, RKB, RT, GR, etc.) 6727' GL	Name of Producing Formation Fruitland		Top Oil/Gas Pay 3306'		Tubing Depth 3469'			
Perforations 3306'-3472'					Depth Casing Shoe			
TURNING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8", 36#, K-55		225'		120 Sx C1 B, Circ 7.5 Bbls			
8-3/4"	7", 23#, J-55		3222'		380 Sx 65/35 Poz. 75 Sx C1 B,			
6-1/4"	5-1/2", 23#, P110		3479'		Circ 7 Bbls			
	2-3/8", 4.7#		3469'					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
-----	-----	-----	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
-----	-----	-----	-----
Actual Prod. During Test	Oil - Bbls	Water - Bbls	Gas - MCF
-----	-----	-----	-----

GAS WELL

Actual Prod. Test - MCF/D 2156	Length of Test 1 hr.	Bbls. Condensate/MCF 121/Wtr	Gravity of Condensate -----
Testing Method (pilot, back pr.) Pilot	Tubing Pressure (Shut-in) 150	Casing Pressure (Shut-in) 1450	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 Title  
7-22-91 (505) 599-3412  
Date Telephone No.

OIL CONSERVATION DIVISION

SEP 10 1991

Date Approved

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT # 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.