DISTRICT! P.O. Box 1980, Hobbe, NM \$1240

	Bottom	

DISTRICT III F.O. Drawer D.D., Arcella, H.M. \$8210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATI TO TRANSPORT OIL AND NATURAL GAS								
DISTRICT III 1000 Rio Brazos Rd., Azioc, NM 87410						/			
L	IO ITVAIN	SPORT OIL	ANU NA	UNAL GA	S TWala	PI No.			
Operator District Person Company Con					""" /			•	
Phillips Petroleum Con	npany								
Address 5525 Hwy 64 NBU 3004,	Farmington, N	1 87401						٠.	
Reason(s) for Filing (Check proper box)		_	[] Ork	s (Please explai	(4)				
New Well	Change is Tr	777				•			
Recompletion 📙	Oi Up	·							
Change in Operator	Casinghead One C	odensale							
If change of operator give same and address of previous operator	······································			 					
IL DESCRIPTION OF WELL	AND LEASE	ol Nama Incheti	ne Formation		Kind o	(Lesso	le Le	ase Na	
Lesse Name San Juan 32-7 Unit	Well No. Pool Name, Including 207 Basin Frui		•		Sinte, 1	, Federal or Fee			
		datii ildi	LLIGHT CO	Ja1					
Location Unit LotterN	1230 F	et From The _S	outh Line	and1576)F	et From The	West	Line	
Section 27 Townshi	p 32N R	nge 7W	N	APM,	San	Juan		County	
III. DESIGNATION OF TRAN	SPORTER OF OIL	AND NATU	RAL GAS		ch armoud	copy of this form	is to be se		
Name of Aixhorized Transporter of Oil	or Condensate		Vocaters from	1 000F 633 10 WA	CA approved	copy of the Jum		- '	
None						21126	is to \$ s as		
Name of Authorized Transporter of Carin	ghead Gas 🔲 or	Dry Gas [X]				copy of this form			
Phillips Petroleum Com						<u>Farmingtor</u>	n, NM	87401	
If well produces oil or liquids, give location of tunks.	Unit Sec. Twp. Rge. Is gas actually connected?				Whee ?				
If this production is commingled with that	from any other lease or poo	l, give commingti	ing order sumb	×er			 		
IV. COMPLETION DATA			·					~	
Designate Type of Completion	- (X)	Cas Well	New Well	Workover	Deepca	Plug Back Sar	ne Res'v	Diff Restv	
Date Spudded	Date Compl. Ready to Pr	×d.	Total Depta			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Ges Pay		Tubing Depth				
	<u> </u>								
Perforations						Depth Casing S	boe		
	TUBING, C.	ASING AND	CEMENTI	NG RECORI	D				
HOLE SIZE	CASING & TUB			DEPTH SET		SAC	KS CEM	ENT	
TIOLE GLE									
						<u>]</u>			
						<u> </u>			
V. TEST DATA AND REQUE	ST FOR ALLOWAR	LE							
OIL WELL (Test must be after t	recovery of total volume of i	ood oil ard must	be equal to or	exceed top allo	moble for thi	s depth or business	ALI ZA	學的問	
Date First New Oil Run To Tank	Date of Test		Producing Me	ethod (Flow, pu	mp, gas lift, i			V & [
Length of Test	Tubing Pressure		Caring Pressure		DEC1 5 1992				
The state of the s	Oil - Bbla,	Water - Bbla.		1					
Actual Prod. During Test	OI - BOIL				O"O'L GON. DIV.'				
GAS WELL							Digi.	•	
Actual Prod. Test - MCF/D	Length of Test Tubing Pressure (Shut-in)		Bbla, Coodensate/MMCF Casing Pressure (Shut-ia)		Gravity of Condensate				
and the section to the section to					Choke Size				
Testing Method (pitot, back pr.)	some steams (one	,		(
VL OPERATOR CERTIFIC	ATE OF COMPI	IANCE	1			4710115	0.00	~	
I bereby certify that the rules and regu	lations of the Oil Conserved	ine	(OIL CON	ISERV	ATION D	IVISI	NC	
Division have been complied with and	that the information given	above							
is true and complete to the best of my	knowledge and belief.		Il not	Annenia	٠ در	DEC 15	1334		
			Jak	1 Whbloae	\	، بين س ت ، بينيا	1		
/ JX W - N L X	"		îi _		7	1) d	/	•	

and the second s THE RESERVE OF THE PROPERTY OF

0. J. Mitchell

Printed Name 12-11-92

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.

Title

SUPERVISOR DISTRICT #3

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Production Foreman

Telephone No.

Title (505) 599-3412

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.