Appropriate Dustrict Witton DISTRICT I P.O. Box 1960, Hobbe, NM 81240

DISTRICT # P.O. Drawer D.O., Artesia, NM \$8210

DISTRICT IN 1000 Rid, Azioc, NM 87410

## OIL CONSERVATION DIVISION P.O. Box 2088

way, minals and Matura esources Department

Santa Pe, New Mexico 8 504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	·			<u> </u>				Wall	UPI No.			
Phillips Petroleum Com	pany								<del></del>	<del></del>		
300 W. Arrington, Suit	e 200,	Farmi	ngt	on, N	M 8	7401					٠.	
Reason(s) for Filing (Check proper box)		Change in	Tore	هد مدوری		Othe	x (Please expl	sie)				
New Well Recompletion	Oil			Cas d			Ofer.	a l	A	ndrs		
Change in Operator 🖸		14 One [								7		
If change of operator give same nor and address of previous operator	thwest	Pipe:	line	Corp	р.,	3539 E.	30th, F	armingt	on, NM	87401	<del></del>	
II. DESCRIPTION OF WELL	AND LE	ASE										
Lease Name Aztec	Well No. Pool Name, Including 202 Basin Frui					Kind (	Kind of Lease State, Federaker Pee		ess No.			
Location	<del> </del>		1			crana oc					<del></del>	
Unit LetterM	<u> 11</u>	31	. Fed I	Prom The	<u> </u>	outh Line	and	7R	et From The	Wes	t Line	
Section 22 Townshi	32	N	Range		10W	. NA	APML	5	an Juan	ı	County	
	CDADTE	TD 000		ND 314								
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR						RAL GAS Address (Give address to which approved copy of this form is to be sent)						
None	Address (Give address to which approved copy of this form is to be sent)											
Name of Authorized Transporter of Casis	head Cos			LX	Address (Give					<b>4158-09</b> 00		
If well produces oil or liquids,	Unit	Sec.	Twp	Ţ	Rgs.	Is gas actually connected?				Claire		
ive location of tanks.  If this production is commingled with that	from say of	er lease or	1	rive orm	mineti	ne celer mush		L	<del></del>			
IV. COMPLETION DATA			1				<b></b>					
Designate Type of Completion	- 00	Oil Well	ı	Gas We	.8	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Rest	
Date Spudded	Date Compl. Rendy to Prod.					Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of P	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Performices						<u>.                                    </u>		<del></del>	Depth Casi	Depth Cheing Shoe		
TUBING, CASING AND												
HOLE SIZE	CA	CASING & TUBING SIZE				•		SACKS CEMENT				
V. TEST DATA AND REQUES	ST FOR A	ALLOW	ABL	Ē					<u> </u>	<u></u> .	·	
OIL WELL (Test must be after )					for full 24 hos	er)						
Date First New Oil Run To Tank	Date of Test				Producing Method (Flow, pump, gas lift, etc.)							
Length of Test	Tubing Pressure				Casing Pressure			D) E	CEI	VEM		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			PA MC	Y Ò 7 199	ש		
GAS WELL	<del></del>					·					• •	
Actual Froil Test - MCF/D	Leagth of Test				Bbla, Condensate/MMCF			GHE GON. DIV.				
Tuting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choks Siz	DIST. 3			
VL OPERATOR CERTIFIC	ATE OF	г СОМ	PLJA	NCE		<u> </u>				DB (101	ON.	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.						Date Approved MAY 0 7 1991						
2. Robinser				·····	<del>-</del> .	By_		3	ع دير	Dans	<i>,</i>	
L. E. Robinson		rlg. &	Tide		ngr.	Title		SUPE	RVISOR	DISTRIC	7 #3	
5-3-91	(505)5	599-34 <b>Td</b>	12 Icphose	No.								

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.