

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aloc, NM 87410

STATE OF NEW MEXICO
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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 API No. 30-045-28777
Address 5525 Hwy. 64, NBU 3004, Farmington, New Mexico 87401		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> 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"/> Well Completion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> <i>Trans. chge. only</i>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 32-7 Unit 9260	Well No. 233	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Other	Lease No. SF-078460
Location Unit Letter L : 1691' Feet From The South Line and 977' Feet From The West Line Section 20 Township 32N Range 7W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate NONE Water Pool# 2806095	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas or Dry Gas Phillips Petroleum Company 2806094	Address (Give address to which approved copy of this form is to be sent) 5525 Hwy. 64, NBU 3004, Farmington, NM					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?

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
Date Spudded 11-9-92	Date Compl. Ready to Prod. 6-14-93	Total Depth 2968'	P.B.T.D. 2968'					
Elevations (DF, RKB, RT, GR, etc.) 6291' GL	Name of Producing Formation Fruitland	Top Oil/Gas Pay 2869'	Tubing Depth 2933'					
Perforations Cased Hole Intervals-2864-94', Open Hole Intervals - 2936-54'			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		287' KB		200 Sx C1 G, Circ 12 Bbls			
8-3/4"	7", 23#, I-55		2830'		425 Sx 65/35 Poz, 150 SX			
6-1/4"	5-1/2"		top 2697'-Btm 2915'		C1 G, Circ 40 Bbls			
	2-3/8", 4 7#		2933'					

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 JUN 25 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CON. DIV DIST. 3

GAS WELL

Actual Prod. Test - MCF/D 2350	Length of Test 1 hr.	Bbls. Condensate/MMCF 200/Wtr.	Gravity of Condensate
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) 0	Casing Pressure (Shut-in) 1150	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
Ed Hasely Environmental Engineer
Printed Name Title
June 23, 1993 (505) 599-3460
Date Telephone No.

OIL CONSERVATION DIVISION JUN 25 1993

Date Approved
By *James D. Chang*
SUPERVISOR DISTRICT #3
Title

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.