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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

**NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

API NO. 30-041-20514

I. Operator  
**Phillips Petroleum Company**

Address  
**Room 401, 4001 Penbrook, Odessa, Texas 79762**

Reason(s) for filing (Check proper box)

New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>			

**ORIGINAL GAS MUST NOT BE REUSED UNLESS AN EXCEPTION TO R-4070 IS OBTAINED**

If change of ownership give name and address of previous owner \_\_\_\_\_

**THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Lambirth-State</b>	Well No. <b>1</b>	Pool Name, including Formation <b>Peterson Fusselman--South</b>	Kind of Lease State, Federal or Fee <b>State</b>	Lease No. <b>L-5048</b>
Location Unit Letter <b>H</b> ; <b>1980</b> Feet From The <b>North</b> Line and <b>510</b> Feet From The <b>East</b>				
Line of Section <b>36</b> Township <b>T-5-S</b> Range <b>R-32-E</b> , NMFM, <b>Roosevelt</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Phillips Trucks</b>	Address (Give address to which approved copy of this form is to be sent) <b>Room 224, 4001 Penbrook, Odessa, Texas 79762</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit <b>H</b> Sec. <b>36</b> Twp. <b>5-S</b> Rge. <b>32-E</b>	Is gas actually connected? <b>No</b> 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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res't. <input type="checkbox"/>	Diff. Res't. <input type="checkbox"/>
Date Spudded <b>11-17-79</b>	Date Compl. Ready to Prod. <b>1-2-80</b>	Total Depth <b>7971'</b>	P.B.T.D. <b>7918'</b>					
Elevations (DF, RKB, RT, GR, etc.) <b>4400' GR</b>	Name of Producing Formation <b>Fusselman</b>	Top Oil/Gas Pay <b>7795'</b>	Tubing Depth <b>7633'</b>					
Perforations <b>7796-7806'</b>	Depth Casing Shoe <b>7633'</b>							
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<b>17-1/2"</b>	<b>13-3/8"</b>	<b>358'</b> (w/420 sxs Cl H w/2% CaCl, 1/4# Flocele, (Circ 96 sxs to surf.))						
<b>11"</b>	<b>8-5/8"</b>	<b>3500'</b> (w/850 sxs Cl H w/30% DD tail in w/200 sxs (Cl H w/2% CaCl, Circ 160 sxs to pit.))						
<b>7-7/8"</b>	<b>5-1/2"</b>	<b>7990'</b> (w/400 sxs Cl H, 30% DD, 2% RCK, 1/2# able for this depth or be for 24 hours + 300 sxs Cl H w/2% KCl)						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL


Date First New Oil Run To Tanks <b>1-5-80</b>	Date of Test <b>3-24-80</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pump</b>
Length of Test <b>24 hrs</b>	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls. <b>31</b>	Water-Bbls. <b>0</b>
		Gas-MCF <b>9</b>

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

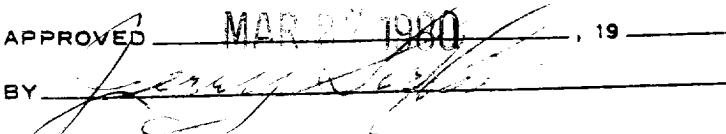
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
**W. J. Mueller**  
(Signature)  
**Senior Engineering Specialist**  
(Title)

**March 25, 1980**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 27 1980**, 19 \_\_\_\_\_

BY 

TITLE **SUPERVISOR DISTRICT**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.