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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

I. Operator
Phillips Petroleum Company
Address
Room B-2, Phillips Building, Odessa, Texas 79760

Reasons for filing (Check proper box)
New Well Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe Btry. 8	Well No., Pool Name, including Formation 121 Vacuum Grayburg/San Andres	Kind of Lease State, XXXXXXXXXX	Lease No. B-2519
Location Unit Letter A 330 Feet From The north Line and 990 Feet From The east			
Line of Section 34 Township 17-S Range 35-E, NMCM, Lea 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"/> Texas New Mexico P. L. Company	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Room B-2, Phillips Bldg., Odessa, Texas 79760
If well produces oil or liquids give location of tanks. Unit: N Sec: 27 Twp: 17-S Rge: 35-E	Is gas actually connected? Yes When 8-26-71

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-97

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 Resrv. <input type="checkbox"/>	Diff. Resrv. <input type="checkbox"/>
Date Spudded 8-5-71	Date Compl. Ready to Prod. 8-21-71	Total Depth 4750'	P.B.T.D. 4730'					
Elevations (DF, RKB, RT, GR, etc.) 3934' RKB, 3923' Gr.	Name of Producing Formation Grayburg/San Andres	Top Oil/Gas Pay 4128'	Tubing Depth 4592'					
Perforations 4448-54', 4472-82'			Depth Casing Shoe 4749'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	394' (350 sx Class H w/2%CaCl2 & 1/4# Flocele (/sx in 1st 150sx Circ 10sx at surface)	
7-7/8"	5-1/2"	4749' (150sx Class H DD & 12sx Class H w/2# Gilsomite/sx. TOC at 2500')	
	2-3/8"	4592'	

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)

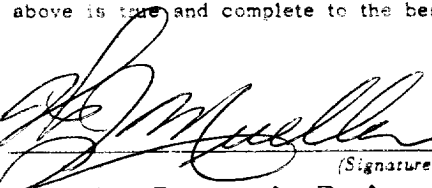
Date First New Oil Run To Tank 8-24-71	Date of Test 8-26-71	Producing Method (Flow, pump, gas lift, etc.) Insert Pump - 2"x1-1/2"x16'	
Length of Test 24	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 198	Water - Bbls. 0	Gas - MCF 224.5

GAS WELL

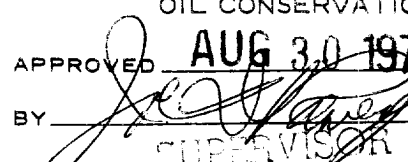
Actual Prod. Test - MCF/D ---	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (altor. back pr.) ---	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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 Reservoir Engineer
(Title)
8-27-71
(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 30 1971**, 19
BY 
TITLE **SUPERVISOR DISTRICT I**

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.