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Г	RECEIVED BY				
	NOV 00 1004				
STATE OF NEW MEXICO	NOV 29 1984				
ENERGY AND MINERALS DEPARTMEN	O. C. D.		Form C-104		
DISTRIGUTION	ARTESIA, OFFICE	TION DIVISION	Revised 10-01-78 Format 05-01-83		
BANTAFE U	Р. О. ВО		Page 1		
U.B.G.S.	SANTA FE, NEV	V MEXICO 87501			
TRANSPORTER CIL K					
OPERATOR	REQUEST FOR ALLOWABLE AND				
PROMATION OFFICE		PORT OIL AND NATURAL GAS			
Dperator					
Phillips Oil Company	<u> </u>				
	ook St., Odessa, Texas	79762			
Reason(s) for filing (Check proper box)		Other (Please explain)			
X New Well Recompletion	Change in Transporter of:	y Gas			
Change in Ownership	Casinghead Gas	ondensate			
I change of ownership give name					
and address of previous owner	-				
II. DESCRIPTION OF WELL AND	LEASE	ormation Kind of Lease			
Lease Name Keely-C Fed	Well No. Pool Name, Including F 58 Grayburg Jackso	on (SR-Q-GB-SA) State, Federal or Fed	• Federal LC-028784		
Location					
Unit Letter P : 660	Feet From The South Lin	e and <u>660</u> Feet From The	East		
Line of Section 25 Towns	hip 17-S Range 29	9-E , NMPM, Eddy	County		
	DTED OF OIL AND NATURAL	CAS			
III. DESIGNATION OF TRANSPO Name of Authorized Transporter of OII	Cr Condensate	Address (Give address to which approved cop	y of this form is to be sent?		
Phillips Pipeline Con		4001 Penbrook St., Odessa, Address (Give address to which approved cop	Tx 79762		
Name of Authorized Transporter of Casing Phillips Petroleum Co		4001 Penbrook St., Odessa,			
	Init Sec. Twp. Rge.	Is gas actually connected? When			
give location of tanks.	F 25 17-S 29-E		20-84 Dect FP-2		
If this production is commingled with t		give commingling order number:	POST +++ 84		
NOTE: Complete Parts IV and V of	on reverse side if necessary.	u .	Compt		
VI. CERTIFICATE OF COMPLIANO	CE .	OIL CONSERVATION			
I hereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED DEC. 0 6.19	184, 19		
been complied with and that the information g my knowledge and belief.	given is true and complete to the best of	Original Signed B BYLodia A. Clament	<u>s</u>		
	•	TITLE Supervisor District	li		
Sp. 1 M		This form is to be filed in complia	ance with BULE 1104.		
- flittell	W.J. Mueller	If this is a request for allowable f	or a newly drilled or deepened		
Senior Engineering S		well, this form must be accompanied by tests taken on the well in accordance	with AULE 111.		
(Tule)	<u>pectation</u>	All sections of this form must be f able on new and recompleted wells.	illed out completely for allow-		
11/27/84 (Date)		Fill out only Sections I. II. III. well name or number, or unnaporter, or o	and VI for changes of owner, ther such change of condition.		
(Duit)		Separate Forms C-104 must be fi completed wells.			
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Form C-104 Revised 10-01-78 Format 06-01-63 Page 2

FV. COMPLETION DATA

	And the second		and the second state of th	And the second s	the second s			
Designate Type of Completio	on = (X) Oil Well X	Gas Well	New Well	Work over	Deepen I	Plug Eack	Same Fiestv. 	Diff. Rest
Dete Spudded	Date Compl. Ready to Pr	rod.	Total Depti			P.B.T.D.	t	h
9/8/84	10/30/84		3200	0		3180		
Clevenions (DF, RKE, RT, GR, etc.) Gr 3587, KB 3598	Grayburg Jackso	Name of Producing Formation Top Oll/Gas Pay Grayburg Jackson 2516'			Tubing Depin 3123'			
Periorations	+ (SR-Q=GB-SA)	, ,,, ,, , , , , , , , , , , , , , , ,		Depth Casis	Depth Casing Shoe			
2516-3127' 77 shots using 3 1/8" OD casing gun		3200	3200'					
	TUBING, (CASING, AN	D CEMENTI	HO RECOR	D			
HOLE SIZE	CASING & TUBIN	NG SIZE		DEPTH SET SACKS CEMENT		ري		
124	8 5/8"		3	721		350sk D	owell "C	" w/2% (
					Mixed @		g -Circ.	
7 7/8	415"	•	320	00'			Dowell L	
Diacel D, 10#/sk sa	It & h#/sk cells	onhanemi	xed @ 11.	.8 nng &	365 sk (lace C w	/5#/sk s:	alt miv
V. TEST DATA AND REQUEST : OIL WELL	FOR ALLOWABLE σ	Test must be a	3113 (d 14 ajter recovery iepth or be for	4 8 PP SIL	me if food of it	and Skin be e	qual to or exce	ed top allo
Date First New Oil Run To Tanks 11/20/84	Date of Test 11/26/84			Producing Method (Flow, pump, gas lift, etc.) Pump 2" x 1 ¹ 2" x 16'				
Length of Teen 24 hrs.	Tubing Pressure 12#		Casing Pre	-seure		Choke Size	·	
Actual Pred, During Test	Oil-Bbla.		Water - Bbla	CONTRACTOR OF THE OWNER		GCS+MCF		
	7.1		1			19		

GAS WELL

Actual Prod. Test-MCF/D	Longth of Tost	Bbis. Condensate/MMCF	Gravity of Condensale
Testing Method (pitol, back pi.)	Tubing Pressure (Shut-in)	Casing Pressure (Ebut-12)	Choke Size