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OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P.O. BOX 2088  
SANTA FE, NEW MEXICO 87501

AUG 06 1985

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ARTIFICIAL OFFICE

Operator **PHILLIPS PETROLEUM COMPANY**

Address **4001 Penbrook Odessa, Texas 79762**

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/>	Changed from Phillips Oil Company August 1, 1985
Change in Transporter of: Oil <input type="checkbox"/> Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner **PHILLIPS OIL COMPANY 4001 Penbrook Odessa, Texas 79762**

**DESCRIPTION OF WELL AND LEASE**

Lease Name State M-AI	Well No. 2	Pool Name, including Formation Empire Abo	Kind of Lease State, Federal or Fee	State	Lease No. E-7179
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Location

Unit Letter **M** : **949.3** Feet From The **south** Line and **990** Feet From The **West**

Line of Section **6** Township **18 S** Range **28 E**, **NMPM**, **Eddy** County

**DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Amoco Pipeline Company</b> <b>000734</b>	<b>2300 Continental National Bank Building Ft. Worth, Texas 76102</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Amoco Production Company</b> <b>000778</b>	<b>2300 Continental National Bank Building Ft. Worth, Texas 76102</b>
If well produces oil or liquids, give location of tanks.	Unit : <b>M</b> Sec. : <b>6</b> Twp. : <b>18S</b> Rge. : <b>28E</b>
	Is gas actually connected? <b>yes</b> When <b>10-26-80</b>

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

**COMPLETION DATA**

Designate Type of Completion - <b>(O)</b>	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. R.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations						Depth Casing Shoe		

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			<b>Post ID-3</b>
			<b>8-9-85</b>
			<b>Chg Op Name</b>

**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 able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

**GAS WELL**

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

**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.

**G. L. Rose**  
(Signature)  
Controller  
(Title)  
August 1, 1985  
(Date)

**OIL CONSERVATION DIVISION**

**AUG 6 1985**

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY **LARRY BROOKS**  
GEOLOGIST - NMOC

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1109. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev. tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for wells on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of record. Separate forms C-104 must be filed for each pool in an