

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

State of New Mexico
Department of Minerals and Natural Resources

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

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OIL CONSERVATION DIVISION RECEIVED

P.O. Box 2088
Santa Fe, New Mexico 87504-2088 MAR 03 1993

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Phillips Petroleum Company Well API No. 30-015-27082
Address 4001 Penbrook St., Odessa, Texas 79762
Reason(s) for Filing (Check proper box) Other (Please explain)
New Well Change in Transporter of: Filed to add oil transporter.
Recompletion Oil Dry Gas Effective date 3/2/93
Change in Operator Casinghead Gas Condensate

II. DESCRIPTION OF WELL AND LEASE
Lease Name Rustler Bluff Federal Well No. 1 Pool Name, Including Formation Willow Lake Delaware
Kind of Lease SMX, Federal of B&K Lease No. NM 53229
Location Unit Letter M : 1195 Feet From The South Line and 935 Feet From The West Line
Section 29 Township 24-S Range 29-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company (Trucks) P. O. Box 791, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas or Dry Gas 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 M Sec. 29 Twp. 24-S Rge. 29-E Is gas actually connected? No When ?

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 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

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
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

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.
L. M. Sanders
Signature L. M. Sanders Title Supv., Reg. Affairs
Printed Name Date 3/2/93 Telephone No. 915/368-1488

OIL CONSERVATION DIVISION
Date Approved MAR 10 1993
By MIKE WILLIAMS ORIGINAL SIGNED BY
Title SUPERVISOR, DISTRICT II

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.