- 1		•		•	•	
: 1	DISTRIBUTION	NEW MEXICO OIL C	CONFEDURATION COM			.*
SANTA FE REQUEST FOR			FOR ALLOWABLE	ns.		d C-104 and C-1
	FILE U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			Effective (-)-	35
	LAND OFFICE	AUTHORIZATION TO TRA	ANSPURT OIL AND I	NATURAL G	:AS	
	FRANSPORTER GAS			e.		
	PROPATION OFFICE					
1.	Operator Operator				<del></del>	
	PHILLIPS PETROLEUM	COMPANY	•		· · · · · · · · · · · · · · · · · · ·	
	4001 Penbrook Stree					
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please	ord (	ler No. 5871	Change
,	Recompletion	CII Dry Go			ause of Unitiz	ation.
	Change in Ownership X	Casinghead Gas Conde	Formerly	7: State	e "F" #2	
	If change of ownership give name and address of previous owner	Bettis, Boyle, & Stova	11, Box 1168, G	raham. Tx	76046	
iI.	DESCRIPTION OF WELL AND	FASE				
	Lease Name East Vacuum GB-		ormation	Kind of Lease		Lease No.
	Unit Tract No. 2054	002 Vacuum GB-SA		State, XXXXXX	CXXXXX	B-2245
		D Feet From The South Lin	ne and 660	Feet From T	west	
		- Con The Document		reat rom 1	ne <u>west</u>	
	Line of Section 20 Tow	mship 17-S Range	35-Е , ммрм	. Lea		County
H.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent)					
	Permian Corp.  Name of Authorized Transporter of Cas	Box 1183, Houston, TX. 77001  Address (Give address to which approved copy of this form is to be sent)				
	Phillips Petroleum Com	4001 Penbrook St., Odessa, Texas 79762				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. M 20 178 35E	Is gas actually connect Yes	ed? Whe	12-1-78	
	If this production is commingled wit			r number:	12 1 / 0	
₩.	COMPLETION DATA	Oll Well Gas Well	New Well Workover	Deepen	Plug Back   Same Res	i'v. Diff. Res'v.
	Designate Type of Completio	<u> </u>	<u> </u>	<u>;</u>	! !	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay		Tubing Depth	
	Perforations				Depth Casing Shoe	
	HOLE SIZE	TUBING, CASING, AND	DEMENTING RECOR		5,546,551	
	HOLE SIZE	CASING & I UBING SIZE	DEPTHS	- 1	SACKS CEN	ENT
				<del></del>		
γ.	TEST DATA AND REQUEST FO	RALLOWABLE (Test must be a	fer recovery of total volu	me of load oil a	nd must be equal to or e	exceed top allow
	Olf. WELL. Date First New Oil Bun To Tanks		pth or be for full 24 hours Producing Method (Flou	1)		
	Date First New Cil Man To lanks	Date of feet	Producing Method (Frou	, pump, gas iiji	, esc./	
	Length of Tont	Tubing Pressure	Casing Pressure		Choke Size	
	Actual Fred. During Test	Oil-Bbls.	Water-Bble.		Gas-MCF	
	Version 1 1000 Danish 1000				332 - 1410.	•
	GAS WELL Actual Prod. Tool-MCF/D	Length of Test	Bbls. Condensate/MMCI	F	Gravity of Condensate	
					Girtif of Contained	
	Teeting Method (pitot, back pr.)	Tubing Presewe (Shut-is)	Casing Pressure (Shut-	-in)	Choke Size	
١.	CERTIFICATE OF COMPLIANC	E	OIL	CONSERVA	TION COMMISSION	N
		•		JAN 10	1970	•
	I hereby certify that the rules and regulations of the Oil Conservation   Communation have been complied with and that the information given		Orig. Signed by			
	blove is true and complete to the best of my knowledge and belief.		BY Jerry Sexton			
			TITLE Diet 1, Supw.			
	Elm Da	e_e			ompliance with RULE	
	-im		If this is a rear	est for allowe	ble for a newly drilling	d or deepened

(Signature)

PRODUCTION CLERICAL SUPERVISOR

(Title)

1-8-79 (Date)

APPROVED	JAN 1 0 1970
	Orig. Signed h
BY	Jorry Sexion
TITI F	Diet 1, Supv.

well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 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.