NG. OF COPIES REC	EIVED		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL UAS		
OPERATOR	******		
DECEATION OFFICE			

III.

IV.

DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE	NEW MEXICO OIL CONSERVATION COMMIS IN REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65	
OPERATOR PRORATION OFFICE Operator				
Phillips Petroleum Company Address				
Room 806, Philli Reason(s) for filing (Check proper box) New We!!  Recompletion Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conden	Other (Please explain)		
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND I	LEASE JANA	Exercale		
Lease Name Marg-B "COM"	Well No. Pool Name, Including Fo		Lease No.  L-101	
Location	Feet From The north Line			
Line of Cention 36 Tow	onship 9_S Range	32-E , ммрм, Lea	County	
DESIGN STION OF TRANSPORT				
Name of American Transporter of Oil	TER OF OIL AND NATURAL GA or Condensate (A)	Address (Give address to which approv	ed copy of this form is to be sent)	
Phillips Petroleum Com		Room 806, Phillips Bldg., Odessa, TX 79761		
Phillips Petroleum Com	<del></del>	Room 806, Phillips Bldg., Odessa, TX 79761		
If well joinnes in oringuids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n	
give isation of this	C   36   9-S   32-E	Yes	7–17–76	
If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA				
Designa a Type of Completio	n = (X) Oil Well Gas Well $X$	New Well Workover Deepen	Plug Back Same Rest Diff. Restv.	
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
3-15-75 Elevan of F. RKB, R1, GR, etc.,	5-20-75	10925 Top Oil/Gas Pay	10879 Tubing Depth	
	Atoka	10327	10520	
10005 101 10005 111			Depth Casing Shoe	
10705-19', 10805-11'		CEMENTING RECORD	10925	
HOLE S.ZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
17-1/4" 11"	13-3/8" 8-5/8"	396' (500 sx Class H w	/2% CaCl <sub>2</sub> Circ 40 sx)	
	0-2/0"	4693' (400 sx TRLW w/2	k temp survey TOC @ 2520	
7-7/8"	5-1/2"	10925!(900 sx Class H w	75/10% LWL. TOC @ 8625	
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable.)  OII. WELL.				
Date First New DD Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	i, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF	
GAS WELL Form C 105 & 122 previously filed				
Actual Pred. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION				
Commission have been complied w	the rules and regulations of the Oil Conservation een complied with and that the information given complete to the best of my knowledge and belief.  TITUE  TITUE  APPROVED  TITUE  TITU			
H / Mal	W. J. Mueller  This form is to be filed in compliance with RULE 1100  If this is a request for allowable for a newly drilled or			

## VI.

Senior Reservoir Engineer

(Title)

8-4-76 (Date)

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.

## RECEIVED

7.00 61976

CIL CONSERVATION COMM.
HOBBS, N. M.