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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
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

I. Operator
Phillips Petroleum Company
Address
Room 806, Phillips Building, Odessa, Texas 79761
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Marg-C "COM"	Well No. 1	Pool Name, Including Formation Undesignated-Atoka Gas	Kind of Lease State, Federal or Sea	Lease No. ---
Location Unit Letter N 660 Feet From The south Line and 1980 Feet From The west Line of Section 24 Township 9-S Range 32-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Approved Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Phillips Petroleum Company-Trucks	Address (Give address to which approved copy of this form is to be sent) Room 806, Phillips Bldg., Odessa, TX 79761			
Name of Approved Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Room 806, Phillips Bldg., Odessa, TX 79761			
If well produces oil or liquids, give location of tank	Unit N	Sec. 24	Twp. 9-S	Rge. 32-E
Is gas actually connected?			When 7-17-76	

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

IV. COMPLETION DATA

Designated Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't	Diff. Res't
		X	X					
Date of Log 5-17-75	Date Compl. Ready to Prod. 7-24-75		Total Depth 10951		P.B.T.D. 10890			
Elev. of DF, HKB, RT, GR, etc. 4341' Gr, 4353' DF	Name of Producing Formation Atoka		Top Oil/Gas Pay 10580		Tubing Depth 10480			
Section 10580-88', 10768-74', 10805-13'					Depth Casing Shoe 10951			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			
17-1/2"	13-3/8"	399' (550 sx Class H w/additives circ 100 sx)						
11"	8-5/8"	4810' (1250 sx Class H Temp survey TOC @ 2020')						
7-7/8"	5-1/2"	10951' (750 sx " H, " " " " 8613')						
	2-7/8 tbg	10480'						

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 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 Forms C-122 and 105 previously filed.

Actual Prod. Test-MCF/D CA of 1425	Length of Test 24 hrs	Bbls. Condensate/MMCF 21 (calc 24 hr rate)	Gravity of Condensate 56
Testing Method (pitot, back pr.) BP	Tubing Pressure (shut-in) 2312#	Casing Pressure (shut-in) packer	Choke Size ---

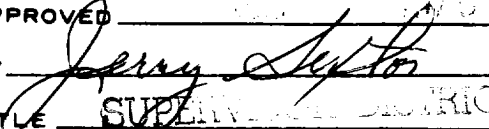
VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


W. J. Mueller
(Signature)
Senior Reservoir Engineer
(Title)

8-4-1976
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY 
TITLE SUPERVISOR DISTRICT 1

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened 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.