NO. OF COPIES RECEIVED				
LISTRIBUTIO				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
I RANSFORTER	GAS			
OPERATOR				
PRORATION OF				

اً ٠	NO. OF COPIES RECEIVED						
	LISTRIBUTION	NEW MEXICO OIL CO	ONISEDVATION COM	4 1011			
	SANTA FE		FOR ALLOWABLE	NOIC JION	Form C-104 Supersedes Old	C-104 and C-110	
	FILE	KEQ0E31 1	AND		Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRAI		NATURAL GAS			
Ī	LAND OFFICE	No months in the man	THE STATE STATES	THE OTHER			
	TRANSPORTER OIL GAS						
	OPERATOR						
1.	PRORATION OFFICE	API No. 30-005-20846					
	Cperator Phillips Petroleum Comp	pany	,,				
	Address	m 70760				, e 1 8	
	4001 Penbrook, Odessa, Reason(s) for filing (Check proper box)	Texas 79762	Other (Pleas		- · · · - · ·		
	New We!!	Change in Transporter of:	Omer (r teas	e explain,			
	Recompletion	Oil Dry Gas					
]	Change in Ownership	Casinghead Gas Condens	sate				
L							
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND L	EASE					
Ī	Lease Name	Well No. Pool Name, Including Fo	ormation	Kind of Lease	_	Lease No.	
	Davis N	4 Chaveroo/San	Andres (Ext)	State, Federal or	Fee Federal	NM0174830	
	Location						
	Unit Letter B; 1980	Feet From The east Line	and 660	Feet From The	north		
			22 =	alana	1/2.		
	Line of Section 18 Tow	nship 8-S Range	33-E , NMP1	M. Gille	2 Loa	County	
		TO OF OUR AND NATURAL CA	c				
II.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate	Address (Give address	to which approved	copy of this form is to	be sent)	
į		& New Mexico, Inc.	9 Greenway Pla				
ĺ	Name of Authorized Transporter of Cast	inghead Gas X or Dry Gas	Address (Give address	to which approved	copy of this form is to	be sent)	
	Cities Service		Box 1919, Mid		9702		
		Unit Sec. Twp. Ege.	Is gas actually connec				
	If well produces oil or liquids, give location of tanks.	F 18 8-S 33-E	Yes	4-2	5-82		
ì	If this production is commingled with	that from any other lease or nool	give commingling orde	er number:			
ıv.	COMPLETION DATA						
	Designate Type of Completion	Oil Well Gas Well	New Well Workover	Deepen P	lug Back Same Res	v. Diff. Restv.	
	Designate Type of Completion	Δ ,	X	1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		.B.T.D.		
	2-15-82	4-21-82 Name of Producing Formation	4620 Top Oil/Gas Pay	-	4550		
	Elevations (DF, RKB, RT, GR, etc.) 4449 DF, 4450 KB	San Andres	3600'	'	4527		
	Perforations 4278-4285	L		3' D	epth Casing Shoe		
	4253-4276' 4299-4304'			_	4620		
	4255 4270 4255 4361	TUBING, CASING, AND					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS CEM	ENT	
	12-1/4"	24#, K-55	604'	4	00 sx Class '	"C"	
	7-7/8"	10.5#, K-55	4620'		.600 sx TLW &	225 sx	
					lass "C"		
			<u> </u>	i			
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 able for this depth or be for full 24 hours)				xceed top allow-			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	ow, pump, gas uju, e			
	4-25-82	4-25-82	Pumping Casing Pressure		Choke Size		
	Length of Test	Tubing Pressure	Casing Pressure				
	24	Oil-Bbis.	Water - Bbls.	G	Gas - MCF		
	Actual Prod. During Test	51	86		39		
		J1					
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM	CF	cavity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL	CONSERVATI	QN COMMISSION	N	
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. APPROVED APPROVED ORIGINAL SIGNED BY ORIGINAL SIGNED BY							
		13					
	above is time and complete to the out of my minimage and senten		ll nac				
		TITLE					

- Chicken	W.	J.	Mueller
(Signature)			
Senior Engineering Specialis	t		

(Title) May 5, 1982

(Date)

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

RECEIVED

MAY 8 1982

O.C.D. HORRS OFFICE

DEVIATION TESTS P1.1LLIPS PETROLEUM COMPANY

DAVIS N #4
Section 18, T-8-S, R-33-E, 660' FNL, 1980' FEL
Chaves County, New Mexico

DEPTH (FEET)	DEVIATION (DEGREES)
610 954	1/2
1,518	3/4 1
1,987 2,515	1
3,059	1 1/4
3,525	1 3/4
4,053	2
4,620	2

WARTON DRILLING COMPANY

B. E. Burton President

SUBSCRIBED AND SWORN TO before me this 10th day of March, A. D. 1982.

Chyree A. Bright, Notary Public in and for the State of Texas