See Instructions at Bottom of Page

Well API No.

OIL CONSERVATION DIVISION

P.O. Box 2088

TO TRANSPORT OIL AND NATURAL GAS

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

Phillips Petroleum Company

Operator

P.O. Drawer DD, Aricaia, NM \$8210

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

4001 Penbrook Street, Odessa, Texas 79762 Attn: Regulation & Proration

Reason(s) for Filing (Check proper box)		,		, , , , , , , , , , , , , , , , , , , ,	Ouh	es (Please expl		1011			
New Well		Change is			_	•	•		:		
Recompletion []	Oil	يا	Dry G								
Change in Operator X	Casingh	ead Gas	Conde	a seale							
change of operator give name address of previous operator Ex	kon Cor	poratio	on, P	. O. Bo	x 1600,	Midland	, Texas	79705	-1600		
L DESCRIPTION OF WELL	AND LE										
well No. Pool Name, Include								Lesse Lesse No.			
South Four Lakes Unit 3 Four Lake				r Lake	s-Penn Sate			E-937			
- · · · · -		660		N	orth	661	1		West		
Unit LetterD	_ :	000	_ Peet Pr	om The	orth Lin	and	F	et From The	WEST	Line	
Section 1 Towns	ip 12-	-S	Range	34-	E , 10	ирм,	I	_ea	<u></u>	County	
II. DESIGNATION OF TRAI	NSPORT	ER OF O	IL AN	D NATU	RAL GAS						
Mazzas of Authorized Transporter of Oil	[X]	or Conde	o sale		Address (Giv	e address to w	hich approved	copy of this fe	orm is to be se	nl)	
Amoco Pipeline Name of Authorized Transporter of Casi	shead Gas	X	or Dry	Get [A Admes /Gin		N'ak anna				
Warren Petroleum		لـــــــنا	u Dij	~	Address (On	e address to w	нис н арргоче а	copy of thus y	orm is to be si	rd)	
If well produces oil or liquids, ive location of tanks.	Unit Sec. Twp. Rge.			is gas actually connected? When			7				
this production is commingled with the	from any o	ther lease or	pool, giv	ve comming	ing order numi	ber:	L				
V. COMPLETION DATA		1011 711)	· · · · · · · · · · · · · · · · · · ·	·				
Designate Type of Completion	- (X)	Oil Wel	' '	Gas Well	New Well	Workover	Doepea	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Cor	npl. Ready I	o Prod.		Total Depth		<u> </u>	P.B.T.D.	1		
Devations (DF, RKB, RT, GR, esc.)	Name of Producing Formation				Top Oil/Gas Psy			Tubing Depth			
Perforations					<u> </u>			Depth Casing Shoe			
								Depar Casa	g sake		
		TUBING	CASI	NG AND	CEMENTI	NG RECOR	D C	- '			
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
								ļ			
								 -	···	· · · · · · · · · · · · · · · · · · ·	
	1			·		···		 			
. TEST DATA AND REQUE					<u> </u>			- 			
IL WELL (Test must be after	recovery of	total volume	of load	oil and must	be equal to or	exceed top all	owable for th	s depth or be	for full 24 hou	F3.)	
are List Less Oil Kird 10 150E	Date of T	cs			Producing M	ethod (Flow, p	nub' for ill'	etc.)	• .		
ength of Test	Tubing Pressure				Casing Pressure			Choke Size	Choke Size		
·											
Actual Prod. During Test	Oil - Bbls.				Water - Bbla.			Gas- MCF	Gu- MCF		
GAS WELL	<u> </u>				1			_1			
ictual Prod. Test - MCF/D	Length a	Test			Bbls. Conder	mic/MMCF		Gravity of	Condensate		
seting Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
L OPERATOR CERTIFIC	TATEO	E COM	OT TAN	JCE	<u> </u>						
I hereby certify that the rules and regi				1CE	(OIL COI	NSERV	ATION	DIVISION	NC	
Division have been complied with an	that the inf	ormation giv	rea abovi	8	III						
is true and complete to the best of my	knowledge /	and belief.			Date	Approve	ed		<u> </u>	9 0	
		/	Λ_{A}								
hw Sande-		hin	VI.A		11						
Signature Sander	/ ,	by	Yh		By_	12 A.2864				i kil	
Signature L. M. Sanders Supr	/., Reg	by.	ratio	on	Ву_	1. (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	क्षारतम् १	· · · · · · · · · · · · · · · · · · ·	Set in	iki	
Signature L. M. Sanders Sup Printed Name	v., Reg		Title		By_ Title		सम्बद्धाः १	C. A. J. Spen	Tet	bi	
Signature L. M. Sanders Supr	v., Reg	(915)	Title	1488			3943 H /	(- A 3 - See	tet or	eti	

- equest 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.