Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Rottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	Т	O TRAI	NSP	ORT OIL	AND NA	TURAL GA	NS				
Operator						Well API No.					
Phillips Petroleum			30-	-025 - 319	25-31931						
Address											
4001 Penbrook St.,	Odess	a, Tex	as	79762		(D)	• • • • • • • • • • • • • • • • • • • •		 		
Reason(s) for Filing (Check proper box)			_	_	U Oth	л (Please expla	ur)			1	
lew Well Change in Transporter of:											
Recompletion											
Change in Operator	Casinghead	Gas 📋	Conde	amte							
If change of operator give name and address of previous operator											
·											
II. DESCRIPTION OF WELL A	AND LEA	SE		vame, Includi	an Engantion		Kind e	of Lease	L	ease No.	
Lease Name	ļ	20				(Devoni	1	Real DOKE	_	06-3	
Ranger		20	77	esc wan	ger name	(DCVOIL	<u></u>			50 5 	
Location	01	^		_	North	. and 660	l' =-	E The	West	Line	
Unit LetterD	: <u> </u>	.0	Feet F	rom The	NOT LI	and	re	et From The	WCDC		
Section 26 Township	12 - S		Range	34-E	. NI	ирм,	Lea			County	
Section 26 Township	12-5			<i>,</i> <u> </u>							
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent)											
Amoco Pipeline Company 302 E. Ave A., Lovington, NM 88260											
Name of Authorized Transporter of Casinghead Gas or Dry Gas X						Address (Give address to which approved copy of this form is to be sent)					
_	GPM Gas Corporation					4044 Penbrook St., Odessa, Texas 79762					
If well produces oil or liquids,	Unit Sec. Twp. Rge.				Is gas actually connected? When			10 - 00			
give location of tanks.	M			<u> SI34-E</u>	No	Yes		Y- 5	43		
If this production is commingled with that f	rom any othe	er lease or p	ool, g	ive commingl	ing order num	DEC					
IV. COMPLETION DATA						· · · · · · · · · · · · · · · · · · ·	 -		10 0 1	him nustr	
T . C	ΔV)	Oil Well	ļ	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u></u>	<u> </u>	<u>X</u>	X Total Depth	<u> </u>	<u> </u>	P.B.T.D.	<u>L</u>		
Date Spudded	Date Compl. Ready to Prod.				•						
5/1/93	8/12/93				13250 Top Oil/Gas Pay			12880 ' Tubing Depth			
Elevations (DF, KAB, KI, GK, etc.)					•			12750'			
4151' GR: 4166' DF Devonian					12851'			Depth Casing Shoe			
Perforations 12851 - 13235					ļ			1225	13250'		
1,707,	CEMENTI	EMENTING RECORD									
1015075	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
HOLE SIZE 17-1/2"	13-3/8"				435'			500 sx C			
12-1/4"	8-5/8"				4200'			1225 sx C			
7-7/8"	5-1/2"				13250'			425 sx H			
7-776	5-1/2				2nd stage:			950 sx H 50/50 poz			
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLI	E	<u> </u>					-	
OIL WELL (Test must be after n	ecovery of to	ial volume i	of load	i oil and must	be equal to o	exceed top all	owable for th	is depth or be	for full 24 hos	ers.)	
Date First New Oil Run To Tank	Date of Ter		-		Producing M	ethod (Flow, p	ump, gas lift,	esc.)			
								1 = - =:	10 1 6		
Length of Test	Tubing Pressure				Casing Pressure			Choke Size	Choke Size		
								0 VCF	Cor MCE		
Actual Prod. During Test	Oil - Bbls.				Water - Bbis	•		Gas- MCF	Gas- MCF		
GAS WELL					•						
Actual Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate		
2614/1162	54 hrs 24 hr				- 85	85			49.5°		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
Back Pr	2776				pkr			12/64			
VI. OPERATOR CERTIFICATE OF COMPLIANCE									DIV (1016	~	
						OIL COI	NSFHA	AHOM	DIAIZIC	ŊΝ	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above											
is true and complete to the best of my	Date	Approve	ed <u>SE</u> F	<u> 1019</u>	93						
Jake Apploved											
Z.m Dande					D./	Orig. Signed by					
Signature Curry Por Affairs					by	By Paul Rautz Geologist					
L. M. Sanders Supv., Req. Affairs Printed Name Title								Peolog 1	5		
	0	15/368			Title	·			 -		
8/24/93 Date	9	Tele	phone	No.	-						
										الناسي المساحد	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request 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.