Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Ener Ainerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

TO TRANSPORT OIL AND NATURAL GAS

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Phillips Petroleum C	ompany							API No. -041-204	18100		
Address 4003 Ponhanak Odoss		36 70	762			····					
4001 Penbrook, Odess Reason(s) for Filing (Check proper box)	a, lex	<u>as 79</u>	702		Oth	et (Piease expl	ain)				
New Well		Change in	Trans	porter of:		(1 10 <u>—</u> 6 —4	,				
Recompletion	Oil		Dry (_		Trident					
Change in Operator	Casinghea	d Gas K	Cond	cosate	Warren	Petrole	um Compa	iny			
and address of previous operator											
L DESCRIPTION OF WELL	AND LE	ASE		<u> </u>						·	
Lease Name Lambirth A		Well No.		Name, Including	ng Formation South Fusselman			Kind of Lease		Lease No.	
Location				ter 3011,	300011	usse illiali	XXX	*****			
Unit LetterF	.:19	80	_ Feet	From The	North Lin	e and	-1980 R	et From The	West	Line	
Section 31 Township	5-	S	Rang	a 33-l	, N	мрм,	Roose	velt		County	
II. DESIGNATION OF TRANS	SPORTE	R OF O	IL A	ND NATUI							
Name of Authorized Transporter of Oil	□ /	or Conde	nsate			e address to w				ent)	
Phillips Petroleum Co. Name of Authorized Transporter of Casing		ucks)	or Dr	ry Gas		enbrook,					
Name of Authorized Transporter of Casing Warren Petroleum Compa	iny	X			Address (Give address to which P. O. Box 1589,		, Tulsa	Tulsa, Ok 74102		int)	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 31	Twp.	33E Rge.	Is gas actual! Ye	y connected? S	When	7	/1/93		
f this production is commingled with that f	rom any oth	er lease or			ing order num	ber:		-			
IV. COMPLETION DATA	,	Oil Wel		Gas Well	New Well	Workover	l Danser	Disc Paris	[C 2 ·	bier s	
Designate Type of Completion -	- (X)		i i	Out Well	I INEW WEIL	WOIKOVEL	Deepen	i hing nack	Same Res'v	Diff Res'v	
Date Spudded	Date Com	pl. Ready to	o Prod.		Total Depth		-1 . <u></u>	P.B.T.D.	<u>.</u>	_1	
Elevations (DF, RKB, RT, GR, etc.)	RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations								Depth Casing Shoe			
									-B 5.110 C		
					CEMENT	NG RECOR					
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	 								·-·	 ·	
V. TEST DATA AND REQUES	T FOR	ALLOW	ABL	E	L				<u>.</u>		
OIL WELL (Test must be after re					be equal to o	r exceed top all	owable for thi	s depth or be	for full 24 hou	ars.)	
Date First New Oil Run To Tank	Date of Te					ethod (Flow, p			· - · · · · · · · · · · · · · · · · · ·	<u></u>	
Length of Test	Tubing Pressure			Casing Pressure			Choke Size				
<u>*</u>											
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL	<u> </u>	·			I			1		-	
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of (Gravity of Condensate		
	M. M										
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	ATE OF	COM	PLIA	NCE][1055:		-		
I hereby certify that the rules and regular					'	OIL COM	NSERV.	AHON	DIVISIO	NC	
Division have been complied with and it is true and complete to the best of my h			7611 20 0	,×6	Dat	.	AllG	2 4 199	3		
NOM	۸ ـ آ				Date	Approve	od				
- KICCALL	<u> </u>				By_	^	DIGINAL S	CNEN DV	IEDDV CEV	IAOT	
Signature K. R. Oberle, Coordinator Finance & Operation					by -			CICT I SUPE	JERRY SEX RVISOR	IUN	
Printed Name			Title		Title						
August 19, 1993 (9	<u>915) 36</u>		ephone	No.					-		
		1.61	-provide		H						

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.