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

State of New Mexico
Ener, Vinerals 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

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

I.

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Phillips Petroleum Company Address									Well API No. 30-041-2050600			
4001 Penbrook, Odess Reason(s) for Filing (Check proper box) New Well	sa, Tex	Change in	762	neter of:	Ot	her (Please	explair)		<u></u>		
Recompletion	Oil Caninghe		Dry G	. 📙	Change Warrer	ed from	ı Tri Oleum	dent N n Compa	IGL, Inc iny	. to		
change of operator give name d address of previous operator												
. DESCRIPTION OF WELL	AND LE	ASE										
Lambirth A		Well No. 4 Pool Name, Includi Peterson			ing Formation n, South Fusselman			Kind (XSMACE)	Kind of Lease Shitte/Fellers in Fee		Lease No.	
Unit LetterA	_ :	560	Foot Pr	rom The No	orth ,	ne and	560)	The	East		
Section 3] Township 5S		Range 33-E						sevelt	Feet From The evelt		Lin	
. DESIGNATION OF TRAN		ER OF O					1100	36761	<u></u>		County	
ame of Authorized Transporter of Oil Phillips Petroleum Comp	or Conden			Address (Give address to which approved 4001 Penbrook, Odessa,				copy of this f	orm is to be se	nt)		
me of Authorized Transporter of Casing	Ţ)	or Dry	Gas	Address (Give address to which approve				d copy of this form is to be sent)				
larren Petroleum Compar	. 	···			P 0 Box 1589			<u>Tulsa. OK 74102</u>				
well produces oil or liquids, e location of tanks.	Unit	Sec. 31	Тwp. 5S	1 33S	Is gas actual Ye	ly connecte	:d?	When				
his production is commingled with that f . COMPLETION DATA	rom any ot	her lease or	pool, giv	ve comming!								
Designate Type of Completion ·	- (X)	Oil Well		Gas Well	New Well	Workov	er	Deepen	Plug Back	Same Res'v	Diff Res'v	
te Spudded	Date Com	pl. Ready to Prod.			Total Depth				P.B.T.D.			
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay				Tubing Depth			
rforations							Depth Casing Shoe					
	•	TUBING,	CASI	NG AND	CEMENT	ING REC	ORD				 -	
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
TEST DATA AND REQUES (L WELL (Test must be after re					he equal to a	r exceed to	n allow	abla for thi	e denth on ho	for full 24 have		
ate First New Oil Run To Tank Date of Test					be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)							
ngth of Test	Tubing Pressure				Casing Pressure				Choke Size			
ctual Prod. During Test	Oil - Bbls.				Water - Bbis.				Gas- MCF			
AS WELL	l								<u> </u>	· · · · · · · · · · · · · · · · · · ·		
ctual Prod. Test - MCF/D	Length of	Test			Bbls. Conde	nmte/MMC	F		Gravity of C	Condensate		
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
I. OPERATOR CERTIFIC				NCE			ONI C	SERV		DIVISIO		
I hereby certify that the rules and regula Division have been complied with and I is true and complete to the best of my k	hat the info	emation give		3					AUG 24		VI N	
12000 C	00	vvii6į.			Date	e Appro	ved			,000		
Signature K. R. Oberle, Coordinator Finance & Operations						By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR						
Printed Name) 368-		Title	Tacron	Title			DISTRIC	i i surkky	10UK		
August 19, 1993, (915) Date	1 308-		phone N	io. `								

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.