00. 07 107100 1111100	P. O. BOX	C 2088		
	SANTA FE, NEW	MEXICO 8750'		<b>.</b>
· · · · · · · · · · · · · · · · · · ·	· ·		,	
LAND UP FICE	REQUEST FOR ALLOWABLE			
TRANSPORTER OA6	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
PERATOR PROBATION OFFICE	AUTHORIZATION TO TRANSPO			
Operator				
PHILLIPS PETROLEUM COM	IPANY			
4001 Penbrook Odess	sa, Texas 79762			
Resson(s) for filing (Check proper box)		Other (Please expl	sinj	
New Well	Change in Transporter el:			
Recompletion XX	Oit Dry Gas Casinghead Gas Condens	751	m 1 Company Augu <u>st 1, 1985</u>	
Change in Ownership			- company nagate it its	
f change of ownership give name	PHILLIPS OIL COMPANY 4	001 Penbrook	<u>Odessa, Texas 79762</u>	
nd address of previous owner				
DESCRIPTION OF WELL AND L	EASE Well No.   Pool Name, Including Fo		of Lease	Lease
Leone Name Lambirth A	5 Peterson South	L'anna lean	, Foderal or Foo Fee	
Location		<u> </u>		•
Unit Letter M : 660	Feet From The South Line	and660F	et From TheWest	
30	5 0	33-Е , ммрм.	Roosevelt	Cau
Line of Section JU T. 4	nship J=5 Range	<u>, NMPM,</u>	Roosevere	
ACTION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S		
None of Authorized Transporter of CIIX	ar Condensate	,	ch approved copy of this form is to be	sentj
Phillips Petroleum Co	mpany - Trucks	4001 Penbrook 0	lessa, Texas 79762 ich approved copy of this form is to be	sent)
Name of Authorized Transporter of Cast			Oklahoma 74102	
Cities Service Compan	Unit Sec. Twp. Rge.	is gas actually connected?	When	
li well produces oil or liquids, give location of tanks.	J 31 5S 33E	Yes	3-23-80	
	h that from any other lease or pool, i	give commingling order num	ber:	
COMPLETION DATA	Oil Well Gas Well		repen Plug Back Same Res'v.	Dill. F
Designate Type of Completion				
Date Spudded	Date Compl. Ready to Prod.	Totai Depth	P.B.T.D.	
			Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas. Pay		
			Depth Casing Shoe	
Perforations				
		CEMENTING RECORD	SACKS CEMEN	 T
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		<u> </u>
			i	
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	iter recovery of total volume a pch or be for full 24 hours)	load oil and must be equal to or exce	ed top
OIL WELL	Date of Test	Producing Method (Flow, pu	np. gas lift, etc.)	
Date First New Oil Run To Tanks				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
		i Wgiet-Bbie.	Gas - MCF	
Actual Prod. During Test	Oli-Bbie.	wdier- BBis.		
	J			
GAS WELL			Gravity of Condensate	<del></del>
Actual Prod. Teet-MCF/D	Length of Test	Bbis. Condensate/MMCF	Crevity of Contenedie	
	Tubing Pressure (Shat-in)	Casing Pressure (Shut-1a	Choke Size	
Testing Method (pirot, back pr.)		•		
CERTIFICATE OF COMPLIANCE	CE	DIL CON	JG - 5.1985	
CERTIFICATE OF COMPENSION			JG - 5 1985	
I hereby certify that the rules and r	egulations of the Oli Conservation	APPROVED		
I hereby certify that the full of with and that the information given Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYORIGINAL SIGNED BY JERRY SEXTON		
		DISTRICT I SUPERVISOR		
	1	This form is to be	filed in compliance with RULE 1	104.
J. B. Rush		I an allowable for a newly drilled or dee		
(Signature)		well, this form must be accompanied by a tabulation of the devi- tests taken on the well in accordance with NULE 111.		
Production Records S		All enclines of thi	a form must be filled out complete	ly for
(Tule) July 29, 1985		eble on new and recom	inne to the till and VI for change	• 01 c
		wait name or number, or	Transporter, or other such change i -104 must be filed for sech pool	
• 1		the communication of C	-104 mner be thun for serviced	