

OF OILS RECEIVED		
DISTRIBUTION		
DATE		
U.S.		
OFFICE		
REPORTER	OIL	
	GAS	
RATOR		
ATION OFFICE		
FORM		

P. O. BOX 2088
ANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PHILLIPS PETROLEUM COMPANY	
4001 Penbrook	Odessa, Texas 79762
son(s) for filing (Check proper box)	
Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Completion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) Changed from Phillips Oil Company August 1, 1985	
Change of ownership give name Phillips Oil Company 4001 Penbrook, Odessa, Texas 79762	
address of previous owner	

SCRIPTION OF WELL AND LEASE				
Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Leamex	10	Leamex Wolfcamp	State, Federal or Fee State	B2148
Section				
Unit Letter	I	619 Feet From The east Line and 2250 Feet From The south		
Line of Section	16	T. 17-S	Range 33-E	NMPM, Lea Cou

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Texas New Mexico Pipeline Company		Box 1510 Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company		4001 Penbrook Odessa, Texas 79762	
Well produces oil or liquids, or location of tanks.	Unit 0	Sec. 17	Twp. 17S Rge. 33E
			Is gas actually connected? yes When 7-4-61

his production is commingled with that from any other lease or pool, give commingling order number:									
COMPLETION DATA									
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. F	
Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
ations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
					Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE L WELL (Text must be after recovery of total volume of load oil and must be equal to or exceed top able for this depth or be for full 24 hours)			
Name First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Final Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

AS WELL			
Final Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Cementing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION AUG - 6 1985	
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 knowledge and belief.		APPROVED _____, 19 ____	
		BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	
		TITLE _____	
J. B. Rush (Signature) Production Records Supervisor (Title) July 30, 1985		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the data tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of name or number, or transporter, or other such change of con	