NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS			
OPERATOR				

MISSIO_{IN}

11.16 Form C-104 5

NO. OF COPIES REC	EIVED		
DISTRIBUTION			NEW MEXICO OIL CONSERVATION CO REQUEST FOR ALLOWABL AND
SANTA FE			
FILE			
U.S.G.S.			AUTHORIZATION TO TRANSPORT OIL AND
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF	FICE		
Operator			

SANTA FE	REQUEST	Supersedes Old C-104 and C-11		
FILE U.S.G.S.	AUTHODIZATION TO TO	6.0		
LAND OFFICE	AUTHORIZATION TO TRA	(A)		
I RANSPORTER OIL			Shersedes Old 6-104 and C-11 Effective 1-1-65 C. O. C. C.	
GAS			4	
OPERATOR PROPATION OFFICE	_			
Operator				
Phillips Petroleum Co	empany			
Address				
Room B-2, Phillips Be Reason(s) for filing (Check proper ba	ilding, Odessa, Texas	79760 Other (Please explain)		
New We!!	Change in Transporter of:	Office (1 tease explain)		
Recompletion	Oil Dry Go	ıs 🔲		
Change in Ownership	Casinghead Gas Conde	nsate		
If change of ownership give name		•		
and address of previous owner				
II. DESCRIPTION OF WELL ANI	LEASE			
Lease Name	Well No. Pool Name, Including F			
Chem State	4 Tulk (Wolfess	State, State	B9642	
Location	\$60 Feet From The Cast 1 in	ne and 1980 Feet From	- comb	
Unit Letter;;	Feet From TheLin	ne and 1780 Feet From	The South	
Line of Section 4	ownship 15-8 Range	32- B , NMPM,	Lea County	
II. DESIGNATION OF TRANSPOL Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which appr	oved copy of this form is to be sent)	
Pan American Petroleu		Box 1725, Midland,		
Name of Authorized Transporter of C		Address (Give address to which appr	oved copy of this form is to be sent)	
		Vented		
If well produces oil or liquids,	Unit Sec. Twp. Rge.		/hen	
give location of tanks.	B 3 15-8 32-E	No	-	
	with that from any other lease or pool,	give commingling order number:		
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
Designate Type of Complet	\mathbf{x}	x		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
4-5-69	5-13-69	10018	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	-	Top Oil/Gas Pay		
4303' GR, 4319' DF	Penn	9742	Opth Casing Shoe	
\	G-941, 9799-98031, 9814-2	20	10018	
1112 409 3133 142 717	TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
17-1/2"	13-3/8"	3961	500 ex Class H. Circ 7	
11"	8-5/8"	<u> </u>	425 ex Class H TOC 2350	
7-7/8*	5-1/2" 2-3/6"	100181	400 ex Trinity Inferno	
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load or	il and must be equal to or exceed top allow	
OIL WELL	able for this a	epth or be for full 24 hours) Producing Method (Flow, pump, gas		
Date First New Oi. Run To Tanks	Date of Test		***************************************	
5-14-69 Length of Test	5-14-69 Tubing Pressure	Casing Pressure	Choke Size	
ei.	260	nacker	1/28	
Actual Prod. During Test	Oil-Bhis.	Water-Bbls.	Gas-MCF	
	550	117	973.5	
GAS WELL	The same of the sa	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Date: Condensate/MMCF	Granty or Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
co				
CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION	
AND THE PROPERTY OF THE PROPER		lie-33	S A DADA	
f hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED	, 19	
transparent have been complied	i with and that the information given the best of my knowledge and belief.		XCharley-	
The is the discomplete to	,	TOTAL CO.	M. OWIRICI	
1		· · · · · · · · · · · · · · · · · · ·		
W. Wind M		This form is to be filed in	n compliance with RULE 1104.	
A Much	W. J. Mueller	wall this form must be accomi	owable for a newly drilled or deepened panied by a tabulation of the deviation	
	gnature)	tests taken on the well in acc	cordance with RULE 111.	

Associate Reservoir Engineer

(Title)

Jule)

5-20-69

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.