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| - HO. OF COPIES REC | | |
| DISTRIBUTIO | | |
| SANTA E | | |
| FILE | | |
| U.S.G.S. | | |
| | | |
| TRANSPORTER | OIL | |
| I ARRESPORTER | GAS | |
| OPERATOR | | |
| PRORATION OF | | |

| | DISTRIBUTION SANTA E | | ONSERVATION COMMISS. 1 | Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 | | |
|---|--|--|--|--|--|--|
| | FILE | AUTHORIZATION TO TRA | AND NSPORT OIL AND NATURAL G | 245 | | |
| | U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | | | |
| | IRANSPORTER OIL | | | | | |
| | OPERATOR GAS | | | | | |
| ı. | PRORATION OFFICE | | | | | |
| Phillips Petroleum Company | | | | | | |
| | Room 711, Phillips Bldg., Odessa, Texas 79761 | | | | | |
| | Reason(s) for filing (Check proper box) New We!! | Change in Transporter of: | Other (Please explain) | | | |
| | Recompletion | Oil Dry Gas | s [] | | | |
| | Change in Ownership | Casinghead Gas Conden | sate | | | |
| | If change of ownership give name and address of previous owner | - THIS WELL HAS BEEN P | LACED IN THE POOL | | | |
| | · | DESIGNATED BELOW. IF | VOU DO NOT COMMAND | • | | |
| 11. | II. DESCRIPTION OF WELL AND LEASE. Well No. Pool Name, Including Formation Kind of Lease Lease Name Lease L | | | | | |
| | Phillips E State | 22 Undersignated-G | b/San Andres State, Pederal | B-2229 | | |
| | Location M 990 | Feet From The South Line | e and 330 Feet From T | rhe east | | |
| | | • | _ | County | | |
| | Line of Section 11 Town | nship 17-S Range | 33-Е , ммрм. Lea | County | | |
| Ш. | DESIGNATION OF TRANSPORTI | FR OF OIL AND NATURAL GA | S Address (Give address to which approx | red copy of this form is to be sent) | | |
| | Name of Authorized Transporter of Oil [Permian Corporation | or Condensate | Box 3119, Midland, Ter | xas 79701 | | |
| | Name of Authorized Transporter of Casil | nghead Gas or Dry Gas | Address (Give address to which approx | ved copy of this form is to be sent) | | |
| | Phillips Petroleum Comp | Dany Unit Sec. Twp. Rge. | Room 711, Phillips Bl | dg., Odessa, Texas 79761 | | |
| | If well priduces oil or liquids, give location of tanks. | B 15 17 33 | Yes | 2-19-76 | | |
| | If this production is commingled with | that from any other lease or pool, | give commingling order number: | _ | | |
| 14. | Design Type of Completion | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Hesty. Diff. Resty. | | |
| | Designate Type of Completion | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | |
| | 1-31-76 | 2-17-76 | 4575 | 4533 | | |
| | Elevations 'DF, RKB, RT, GR, etc., | Name of Producing Formation | Top Oil/Gas Pay 4235 | Tubing Depth | | |
| | 4137.8'GR, 4147.5' RKB | GB/San Andres | Depth Casing Shoe | | | |
| | 4394-991, 4422-271, 44 | 45-50', 4482-87' | | 4575 | | |
| | | TUBING, CASING, AND CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | |
| | 12-1/4" | 8-5/8" | 400' | (400 sx Class H w/additiv | | |
| | | | | Circ 20 sx) | | |
| | 7-7/8" | 4-1/2" 2-3/8" tgb at 4517' | | 150 sx Class H w/40% DD) s H w/8# salt/sx. TOC at | | |
| v | TEST DATA AND REQUEST FO | DATTOWARTE (Test must be a | fter recovery of total volume of load oil | | | |
| • | OIL WELL Date First New Cil Bun To Tanks | IND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allows able for this depth or be for full 24 hours) (I Bun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) | | | | |
| • | | 3-3-76 | Insert pump 2" x 1-1/4 | | | |
| | Length of Teet | Tubing Pressure | Casing Pressure | Choke Sixe | | |
| | 24 hrs. Actual Prod. During Teet | Oil-Bbls. | Water - Bble. | Gas-MCF | | |
| | Actual Prod. During 1991 | 105 | 1 | 62 | | |
| | | | | | | |
| | Actual Pred. Test-MCF/D | Length of Teet | Bbls. Condensate/MMCF | Gravity of Condensate | | |
| | | - . | | Chaha Sira | | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size | | |
| VI | . CERTIFICATE OF COMPLIANC | E . | OIL CONSERVATION COMMISSION | | | |
| I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. THILE | | | APPROVED 19 | | | |
| | | | and Levis Arton | | | |
| | | | | 1 | | |
| | | | 11 | · · · · · · · · · · · · · · · · · · · | | |
| | W.J.Mueller Signature) | | This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | | | |
| | | | | | | |
| Engineering Advisor | | All sections of this form must be filled out completely for allow- | | | | |

(Title)

(Date)

3-4-76

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.

STATE OF NEW 1974CO

INCLINATION REPORT

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT.

| | <u>Undesignated-Gb/San Andres</u> | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| Operator Phillips Petroleum Company Lease Name Phillips E State | | AddressRoom 71 | 1. Phillips City Odessa TX | | | | | |
| Lease Name | Phillips E State | Well No. 22 | Bldg. 79761 | | | | | |
| Location | Unit M. 990 feet from | the south 1 | ine and 330 feet from | | | | | |
| | west line of Section 11 | , Township | 17-S , Range 33-E | | | | | |
| | | | | | | | | |
| RECORD OF INCLINATION | | | | | | | | |
| | Angle of | | Angle of | | | | | |
| Depth (Feet | | Depth (Feet) | <u>Inclination (Degrees)</u> | | | | | |
| 1265 | $-\frac{11}{271}$ | | | | | | | |
| 1760 | | | | | | | | |
| 2325 | 1 | | | | | | | |
| 2790 | 1-1/2 | | | | | | | |
| 3268 | $-\frac{1/2}{}$ | nin i brillionile diane a case en marroccia. Por signa a sur anno | | | | | | |
| 3337 | | | * ** ****************************** | | | | | |
| 3830 4485 | $-\frac{1/2}{1/2}$ | | | | | | | |
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| | etify that I have personal knowledge of th information given above is true and | | ets placed on this form | | | | | |
| | | igniture and Titi | e of Affiant Engineering Advisor | | | | | |
| Sworn and Su | ebscribed to before me, this the | 2th day of I | February, | | | | | |
| 19 _76 | | | * | | | | | |
| | , | | | | | | | |
| | Lorather | 7 Anderse | Dorothy V. Anderson | | | | | |
| | Z N | otary Public in a | Dorothy V. Anderson and fer Ector | | | | | |
| | Ü | cunty, Texas | | | | | | |