NO. OF COPIES ACCEIVED	7		
DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-11
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GA	S
IRANSPORTER OIL GAS			
OPERATOR			
PROPATION OFFICE			•
Operator	- 1		-
PHILLIPS PETROLE			· · · · · · · · · · · · · · · · · · ·
4001 Penbrook St Reason(s) for filing (Check proper bo	reet, Odessa, Texas 7976	2 Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion		• □	
Change in Ownership	Casinghead Gas Conder		
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL ANI	ULEASE	ormation Kind of Lease	Lease No.
Phillips "E" Star			
Location			
Unit Letter B;	330 Feet From The North Lin	e and <u>1980</u> Feet From The	East
Line of Section 14 T	ownship 175 Range 3.	3-Е , ММРМ, Lea	County
	RTER OF OIL AND NATURAL GA	S Address (Give address to which approved	convolthis form is to be sent
Name of Authorized Transporter of O			1
Philips Petrolet	um Company - Trucks asingh <del>a</del> ad Gas - or Dry Gas -	4001 Penbrook Street. Oc Address (Give address to which approved	copy of this form is to be sent)
Phillips Petrole		4001 Penbrook Street. Od	lessa, Texas 79762
If well enduces of at liquids.	Unit Sec. Twp. P.ge.	Is gas actually connected? When	
	B 15 17S 33E	Yes	11/21/76
•	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen F	Plug Back   Same Restv.   Diff. Restv.
Designate Type of Complet			!
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE			
		<u>í</u>	
TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a) able for this de	fter recovery of total volume of load oil and pth or be for full 24 hours)	I must be equal to or exceed top allow-
OII. WELL Date 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
			Gas • MCF
Actual Prod. During Test	Oil-Bble.		
*	· ·		
GAS WELL	Leasth of Test	Bbla, Condenagte/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Longth of Test		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIA!	NCE	OIL CONSERVAT	ION 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. MANACOULDE W. D. Steinbeck (Signature)		APPROVED	
		BY ORIGINAL SIGNER BY	
		JERNY SEVENSE	
		This form is to be filed in cor	npliance with RULE 1104.
		If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
•	Title)	able on now and recompleted wells.	
6/22/82 (Date)		Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such changes of condition.	

## RECEIVED

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