P. O. BOX 2088

Pet t MIRWITION PREFINED
FRE
U.S.S. OIL

## - SANTA FE, NEW MEXICO 87501

## AND

REQUEST FOR ALLOWABLE TRANSPORTER QA6 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 9

PROMATION OFFICE			3 1117410.							
PHILLIPS PETROLEUM CO	MPANY									
4001 Penbrook	Odessa	, Texas	797	62					·	
Resson(s) for filing (Check proper box)		, 10300	, , , , , ,		her (Please	explain)			<u> </u>	
Now Woll	Change in 7	tanaporter (	ol: Dry Gai		Changed	from				
Recempletion Change in Ownership	Casinghead	c	Conden	75	Phillip	s Oil Comp	pany Aug	gust 1,	1985	
If change of ownership give name and address of previous owner	PHILLIPS O	IL COMP	ANY 4	001 Penb	rook	Odessa, 1	Texas 797	762		
DESCRIPTION OF WELL AND I	LEASE								<del></del>	
Phillips See Esta	Mell No. P		ncluding Fo r Graybu	irg San A	ndres	Kind of Lease State, Federal	_	ate	B-2229	
Location  Unit Letter P : 660	Feet From	The Sout	hLine	and6	60	Feet From T	he <u>Fa</u>	st		
1,	mahip 1	7 S	Range	33 E	, NMPM	•	Lea		Coun	
DESIGNATION OF TRANSPORT	ER OF OIL A	ND NATI	URAL GA	S Address (Gu	ve address	to which approv	ed copy of thi	is form is t	o be sent)	
Phillips Petroleum Company - Trucks					4001 Penbrook Odessa, Texas 79762  Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas Phillips Petroleum Company					4001 Penbrook Odessa, Texas 79762					
H well produces oil or liquids, give location of tanks.	Unit Sec. P 14	17S	Rge. 33E	ls gas actua	es	ed? Whe		9-77		
If this production is commingled wit	h that from any	other leas	e or pool,	give commin	gling orde	r number:				
Designate Type of Completio		Well (	Gas Well	New Well	Workover	Deepen	Plug Back	'Same Res I I	v. Dill. He	
Date Spudded	Date Compl. Re	ady to Prod.	•	Total Depth	1		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Qil/Gas Pay			Tubing Depth			
Perforations				<u> </u>		•	Depth Casin	ig Shoe		
	TU	BING, CA	SING, AND	CEMENTIN	G RECOR	RD				
HOLE SIZE					DEPTH S	ET	SACKS CEMENT			
	<u> </u>									
					<del></del>		<u> </u>			
TEST DATA AND REQUEST FO	OR ALLOWAB	LE Tes	t must be at	ier recovery of pth or be for f	of total vali full 24 hour	ime of load oil i	and must be e	qual to or e	eceed top a	
Date First New Oil Run To Tanks	Date of Test			Producing.M	sethod (Fior	u, pump, gas lif	; etc.)			
Length of Test	Tubing Pleasure	•		Casing Pres	eme		Choke Size	•		
Actual Prod. During Test	CII-BMe.		<del></del>	Water-Bbis.	<del></del> _		Gas-MCF			
				<u>                                      </u>			<u> </u>			
GAS WELL	Length of Test			Bble. Conde	necte/MMC	F	Cravity of	Condenegte		
Actual Prod. Test-MCF/D				Casing Pressure (Shut-in)			Choic Size			
Tesung Method (puot, back pr.)	Tubing Pressure (Shut-in)			OIL CONSERVAT			TON DIVISION			
CERTIFICATE OF COMPLIANCE					. 1	AUG 12		אוטוע	10	
I hereby certify that the rules and r Division have been complied with	egulations of the	ne Oll Con	servation	APPROV						
above is true and complete to the	best of may kn	owledge 4	nd belief.	TITLE_		METRICT I SU	ENVISOR	TUIV		
, , , , ,				This	form is t	o to filed in (	compliance	with RUL	E 1104.	
A. J. Kne	G. L.	Rose		If th	is is a rec	quest for allow it be accompa   well in sccor	rable for a n	newly drill	ed or deep of the devi	
Controller				11		I this form mu	at be filled	out compl	etely for a	
(Tille) August 1, 1985				shie on new and recompleted wells.  Fill out only Sections I. II. III, and VI for changes of or well name or number, or transporter, or other such change of cond.						
(De	i(e)			Sepa	rate Forn	na C-104 mus	t be filed f	or each p	ont in mui	