	NO. OF COPIES RECEIVED				
	DISTRIBUTION	'EW MEXICO OIL C	ONSERVATION COMMISS!	Form C-104	
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	FILE		AND	Ellective 1-1-03	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	S .	
	LAND OFFICE		·		
	TRANSPORTER GAS		^		
	OPERATOR				
	PRORATION OFFICE				
I.	Operator Operator		· · · · · · · · · · · · · · · · · · ·		
	Phillips Petroleu	m Company		1	
	Address PHILITIPS FELLOTED	uir Company			
		on Dida Odessa TY 79	761		
	Reason(s) for filing (Check proper box)	os Bldg., Odessa, TX 79		and the second s	
	New Well X	Change in Transporter of:	CASIBLES	+ 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	
	Recompletion	Oil Dry Ga	· The Windows	(5) (5) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
		Casinghead Gas Conden		AND	
	Change in Ownership	Cdalligheda Cda []			
	If change of ownership give name	THIS WELL HAS BEEN			
	and address of previous owner	THIS WELL HAS BEEN DESIGNATED BELOW	N PLACED IN THE POOL		
			IF YOU DO NOT CONCUR		
11.	DESCRIPTION OF WELL AND L	EASF.		Lease No.	
	Lease Name	1 .	V (2) 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	B2229	
	Phillips E State, Brty	3 29 Maljamar Gb/Sa	n Andres	BRREY	
	Location		//-		
	Unit Letter P : 660	Feet From The South Lin	e and 660 Feet From Th	e east	
			00 T		
	Line of Section 14 Town	nship 17–S Range	33-E , ммрм. Lea	County	
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	IS	of conv of this form is to be sent)	
	Name of A trurised Transporter of Oil		Address (Give address to which approved copy of this form is to be sent)		
	Phillips Petroleum Company—Truck Name of Authorized Transporter of Casinghead Gas X or Dry Gas		Room 101, Phillips Bldg., Odessa, TX 79761 Address (Give address to which approved copy of this form is to be sent)		
			4	deany of this form is to be sent!	
	Name or Vitherized Transporter of Cast	inghead Gas 🛣 or Dry Gas 🗔	Address (Give address to which approve	ed copy of this form is to be sent)	
	1	any	Room 806, Phillips Bldg.	o, Odessa, TX 79761	
	Phillips Petroleum Comp		Address (Give address to which approve	o, Odessa, TX 79761	
	1	any	Room 806, Phillips Bldg.	o, Odessa, TX 79761	
	Phillips Petroleum Compa if well produces oil or liquids, give location of times.	eny Unit Sec. Twp. Rge. P 14 17 33	Room 806, Phillips Bldg. Is gas actually connected? No	o, Odessa, TX 79761	
IV	Phillips Petroleum Compairs well produces of or liquids, give location of tanks. If this production is commingled with	P 14 17 33 that from any other lease or pool,	Room 806, Phillips Bldg. Is gas actually connected? When No	o, Odessa, TX 79761 No	
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Tubing Pressure (Shut-in)

W. J. Mueller

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.

D. (Signature)

(Title)

4-4-77

(Date)

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Engineering Advisor

OIL	CONSERVATION	COMMISSION
_		

Choke Size

TITLE _

This form is to be filed in compliance with RULE 1104.

Casing Pressure (Shut-in)

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.

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.

RECEIVED

APE (1977)

OIL CONSERVAL UN COMM. HOBBS, N. M.

STATE OF NEW MEXICO

INCLINATION REPORT

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT.

Field Name	Maljamar Grayburg/San Andres	County Lea	
Operator Ph	nillips Petroleum Company		Phillips Bldg.City Odessa, TX
Lease Name	Phillips E State	Well No. 29	79761
_	and the state of t	From the south	line and 660 for the
	east line of Section 1	.4 , Township	17-S , Range 33-E
	RECORD OF INC	ግ ፕክለ ጥፕ <i>ር</i> ጽ፤	
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I hereby cert	sify that I have personal knowledge	of the data and fac	ets placed on this form
and that such	n information given above is true a	nd complete.	-
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		Signature and Text	e of Affiant
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	escribed to before me, this the		March ,
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	_	N-1-1/1	Craow Dorothy V. Anderson
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My Commission	on Expires 6-1-77	County, Texas	