

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

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U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator PHILLIPS PETROLEUM COMPANY

Address 4001 Penbrook Odessa, Texas 79762

Reason(s) for filing (Check proper box) Other (Please explain)

<input type="checkbox"/> New Well	Change in Transporter of:	Effective date <u>1-1-86</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE *Lease*

Lease Name <u>Phillips State E State</u>	Well No. <u>30</u>	Pool Name, including Formation <u>Maljamar Grayburg San Andres</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>B-2229</u>
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Location L 1980 Feet From The South Line and 660 Feet From The West

Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West

Line of Section 13 Township 17S Range 33E NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Company-Trucks</u>	<u>4001 Penbrook, Odessa, Texas 79762</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips 66 Natural Gas Company</u>	<u>4001 Penbrook, Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>P</u> Sec. <u>14</u> Twp. <u>17S</u> Rge. <u>33E</u>	<u>YES</u> <u>05-19-77</u>

If this production is commingled with that from any other lease or pool, give commingling order number _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Ken Johnson Ken Johnson
(Signature)
Production Records Supervisor
January 24, 1986 (Date)

OIL CONSERVATION DIVISION
APPROVED MAR 19 1986, 19____
ORIGINAL SIGNED BY JERRY SEXTON
BY _____ DISTRICT SUPERVISOR
TITLE _____

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.
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 multiple completed wells.

STATE OF NEW MEXICO
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

API No. 30-025-25437

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-2229	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Conversion to water injection per NMOC Order WEX 534		7. Unit Agreement Name
2. Name of Operator Phillips Petroleum Company		8. Farm or Lease Name Phillips E State
3. Address of Operator Room 401, 4001 Penbrook Street, Odessa, Texas 79762		9. Well No. 30
4. Location of Well UNIT LETTER <u>L</u> 1980 FEET FROM THE <u>south</u> LINE AND <u>660</u> FEET FROM THE <u>west</u> LINE, SECTION <u>13</u> TOWNSHIP <u>17-S</u> RANGE <u>33-E</u> NMPM.		10. Field and Pool, or Wildcat Maljamar GB/SA
15. Elevation (Show whether DF, RT, GR, etc.) 4130'GR		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Commencement of water injection</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Well is presently injecting at average rate of 115 BWPD @ 700 psi into 4-1/2" casing perfs 4432'-4582' as of May.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED W.J. Mueller TITLE Sr. Engineering Specialist DATE September 3, 1985
ORIGINAL WORKED BY JERRY SEXTON
APPROVED BY INSTRUCT I SUPERVISOR DATE SEP - 9 1985