

DISTRIBUTION		
TA FE		
E		
G.S.		
D OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
OPERATION OFFICE		

NEW MEXICO OIL CONSERVATION COM SION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and  
Effective 1-1-65

Address **M & W OF LOVINGTON, INC.** (~~TARGET PRODUCTION CO.~~)  
**BOX 922, LOVINGTON, NM 88260**

Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of: Oil ☒ Gas ☐  
Completion ☐ Other (Please explain) \_\_\_\_\_  
Change in Ownership ☐ Change in Ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Section	Kind of Lease	Lease No.
<b>WYATT PHILLIPS 7</b>		<b>CORBIN QUEEN <del>MALJANAR</del></b>	State, Federal or Fee <b>FED</b>	<b>N M801</b>
Section <b>F</b>	<b>2310</b>	Feet From The <b>North</b>	<b>1650</b>	Feet From The <b>West</b>
Line of Section <b>34</b>	Township <b>17S</b>	Range <b>33E</b>	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)
<b>Phillips 66 Company Trucks</b>	<b>9C1 Adams Bldg Bartlesville Ok 74004</b>
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)
<b>Phillips Petroleum Corp Natl Gas</b>	<b>4th &amp; WASHINGTON Odessa Tx. 79760</b>
Well produces oil or liquids, and location of tanks.	Is gas actually connected? When
Unit <b>F</b> Sec. <b>34</b> Twp. <b>17S</b> Rng. <b>33E</b>	<b>No</b>

IV. COMPLETION DATA

Designate Type of Completion - (X) ☒ Spudded ☐ Drilled ☐ Other \_\_\_\_\_

Date Compl. Ready to Prod.	Final Depth	Perforations	Depth Casing Shoe
Productions (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Perforations	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

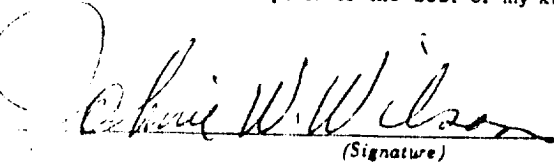
Time First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Final Prod. During Test	Oil - Bbls.	Water - Bbls.
		Gas - MCF

GAS WELL

Final Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Producing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

  
(Signature)  
**PRESIDENT**  
**9/30/88** (Title)  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **9/30/88**, 19\_\_\_\_

BY **Orig. Signed by Paul Kautz**  
Geologist

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.