

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| | GAS | |
| OPERATOR | | |
| PRODUCTION OFFICE | | |

OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

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):

| | | |
|--|--|--|
| <input type="checkbox"/> New Well | Change in Transporter of: | Other (Please explain) Effective date 1-1-86 |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas | |
| <input type="checkbox"/> Change in Ownership | <input checked="" type="checkbox"/> Coastinghead Gas <input type="checkbox"/> Condensate | |

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|--------------------|--|---|----------------------------|
| Lease Name Vacuum Abo Unit Battery 2 Tract 13 | Well No. 12 | Pool Name, including Formation Vacuum Abo Reef | Kind of Lease State, Federal or Fee State | Lease No. B-1713 |
| Location Unit Letter G ; 1650 Feet From The North Line and 1980 Feet From The East Line of Section 4 Township 18S Range 35E , NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

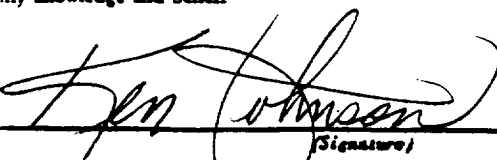
| | |
|---|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, New Mexico 88240 |
| Name of Authorized Transporter of Coastinghead Gas <input checked="" type="checkbox"/> PHILLIPS 66 Phillips 66 Natural Gas Company GPM Gas Corporation | Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When F 4 18S 35E YES |

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

OIL CONSERVATION DIVISION
MAR 18 1986
APPROVED _____, 19____
BY _____
ORIGINAL SIGNED BY JERRY SEXTON
TITLE _____ DISTRICT I SUPERVISOR

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 multiply completed wells.

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