

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                       |   |
|-----------------------|---|
| NO. OF COPIES DESIRED |   |
| DISTRIBUTION          |   |
| SANTA FE              |   |
| PHS                   |   |
| U.S.O.S.              |   |
| LAND OFFICE           |   |
| TRANSPORTER           |   |
| OIL                   |   |
| GAS                   |   |
| OPERATOR              | X |
| PRODUCTION OFFICE     |   |

Operator  
Phillips Oil Company

Address

4001 Penbrook Street, Odessa, Texas 79762

Reason(s) for filing (Check proper box)

New Well ☐  
Recompletion ☐  
Change in Ownership ☒

Change in Transporter oil:

Oil ☐ Dry Gas ☐  
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Effective 12/01/83

If change of ownership give name and address of previous owner: Phillips Petroleum Company, 4001 Penbrook Street, Odessa, Texas 79762

## DESCRIPTION OF WELL AND LEASE

|  |          |                                |                             |           |
|--|----------|--------------------------------|-----------------------------|-----------|
| Lease Name   | Well No. | Pool Name, including Formation | Kind of Lease               | Lease No. |
| Vacuum Abo Unit Battery 2  | 17       | Vacuum Abo Reef                | State, Federal or Fee State | B-3140    |
| Location   |          |                                |                             |           |
| Tract 13   |          |                                |                             |           |
| Unit Letter 0 : 890 Feet From The South Line and 2210 Feet From The East |          |                                |                             |           |
| Line of Section 5 Township 18S Range 35E NMPM Lea County                 |          |                                |                             |           |

## 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) |
| Texas-New Mexico Pipe Line Company   | P. O. Box 2528, Hobbs, N.M. 88240  |
| 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) |
| Phillips Petroleum Company   | 4001 Penbrook Street, 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:

## COMPLETION DATA

|                                    |                             |                 |                   |          |        |           |             |              |
|------------------------------------|-----------------------------|-----------------|-------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well                    | Gas Well        | New Well          | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
|                                    |                             |                 |                   |          |        |           |             |              |
| Date Spudded                       | Date Compl. Ready to Prod.  | Total Depth     | P.B.T.D.          |          |        |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth      |          |        |           |             |              |
| Perforations                       |                             |                 | Depth Casing Shoe |          |        |           |             |              |

## TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |

## 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)

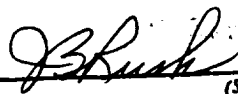
|                                 |                 |   |            |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| Length of Test                  | Tubing Pressure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

## GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (prior, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |

## 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 above is true and complete to the best of my knowledge and belief.



J. B. Rush

(Signature)

Production Records Supervisor

(Title)

December 29, 1983

(Date)

## OIL CONSERVATION DIVISION

JAN 13 1984

APPROVED

BY ORIGINAL SIGNED BY EDDIE SEAYGA

TITLE OIL &amp; GAS INSPECTOR

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.