

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Phillips Petroleum Company	
Address Room B-2 Phillips Bldg., Odessa, Texas 79760	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain.)	

If change of ownership give name
and address of previous owner

Lease Name Santa Fe, Btry. 3		Well No. 115	Pool Name, Including Formation Vacuum Grayburg/San Andres	Kind of Lease State, Federal or Free	Lease No. B-2131
Location					
Unit Letter C	330	Feet From The north	Line and 1650	Feet From The west	
Line of Section 4	Township 18-S	Range 35-E	, NMPM, Lea		County

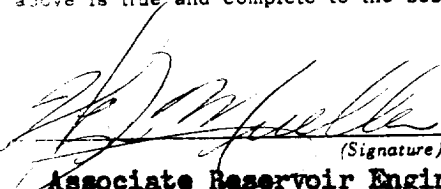
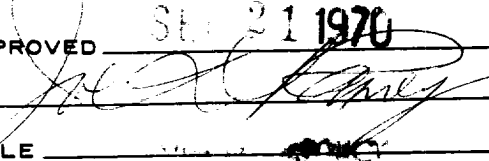
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
Texas-New Mexico Pipeline Company		Box 1510, Midland, Texas 79701				
Name of Authorized Transporter of Casinghead Gas <input 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		Room B-2 Phillips Bldg., Odessa, Texas 79760				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 5	Twp. 18	Rge. 35	Is gas actually connected? Yes	When 9-13-70

If this production is commingled with that from any other lease or pool, give commingling order number: **No**

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 8-29-70	Date Compl. Ready to Prod. 9-13-70		Total Depth 4805		P.B.T.D. 4660				
Elevations (DF, RKB, RT, GR, etc.) 3942' GR, 3952' DF	Name of Producing Formation San Andres		Top Oil/Gas Pay 4476		Tubing Depth 4511				
Perforations 4580-86', 4598-4608', 4616-18', 4622-28'					Depth Casing Shoe 4801				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 12-1/4" 7-7/8"	CASING & TUBING SIZE 8-5/8" 4-1/2" 2-3/8" tubing		DEPTH SET 361' (300 ax Class H. Circ 95 ax) 4801' (150ax Class H w/40% DD & 125 ax Class H neat. TOC @ 2650') 4566'		SACKS CEMENT 4660 4511 4801				

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)			
Date First New Oil Run To Tanks 9-14-70	Date of Test 9-15-70	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 8 hours	Tubing Pressure 140#	Casing Pressure -	Choke Size 1/2
Actual Prod. During Test	Oil-Bbls. 128	Water-Bbls. 0	Gas-MCF 57.6

GAS WELL			
Actual Prod. Test-MCF/D -	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED SEP 21 1970 , 19	
 W. J. Mueller (Signature) Associate Reservoir Engineer (Title) September 16, 1970 (Date)		BY  TITLE ENGINEER	
		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.	

RECEIVED

SEP 16 1970

ON CONSERVATION S. 11.
2000-10-10