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 TRANSPORTER \_\_\_\_\_  
 OPERATOR \_\_\_\_\_  
 PRODUCTION OFFICE \_\_\_\_\_

NEW MEXICO OIL CONSERVATION COMMISSION  
 REGULATION NO. 104

Form O-104  
 Supersedes Old O-104 and C-104  
 Effective 1-1-75

REGULATION NO. 104 - OIL AND NATURAL GAS

I. OPERATOR  
 Phillips Petroleum Company  
 Address: 4001 Penbrook St., Odessa, Texas 79762  
 Reason(s) for filing (check appropriate box):  
 New Well  Change in Transporter or Lease Name  Order No. 3871 Change of lease name because of Unitization.  
 Recombination  Change in Ownership  Formerly Phillips - Santa Fe # 129  
 Change in Ownership

If change of ownership or address of previous owner: Phillips Petroleum Co., 4001 Penbrook St., Odessa, Texas 79762

II. DESCRIPTION OF WELL  
 Lease Name: East Vacuum 12-12  
 Unit Tract No.: 0524 129 Vacuum 12-12  
 Location: Unit Letter E 1650 Section North 990 Feet From The West  
 Line of Section: 5 Township 18S Range 35E County Lea

III. DESIGNATION OF TRANSPORTER FOR OIL AND NATURAL GAS  
 Name of Authorized Transporter of Oil: Texas-New Mexico Pipe Line  
 Name of Authorized Transporter of Natural Gas: Phillips Petroleum Company  
 Address: P.O. Box 3528, Hobbs, N.M. 38240  
 Address: 4001 Penbrook St., Odessa, Texas 79762  
 If well produces oil or liquids, give location of tanks: E 5 18S 35E  
 Is the naturally connected? Yes  
 When: 12-1-78

IV. COMPLETION DATA  
 Designate Type of Completion: (X) Full Well  
 Date Spudded: \_\_\_\_\_  
 Elevations (D.F., H.A.B., RT., CR., etc.): \_\_\_\_\_  
 Perforations: \_\_\_\_\_  
 TUBING, CASING, AND CEMENTING RECORD  
 HOLE SIZE: \_\_\_\_\_ CASING & TUBING SIZE: \_\_\_\_\_ DEPTH SET: \_\_\_\_\_ SACKS CEMENT: \_\_\_\_\_

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  
 Date First New Oil Run To Tanks: \_\_\_\_\_ Date of Test: \_\_\_\_\_  
 Length of Test: \_\_\_\_\_ Shut-in Pressure: \_\_\_\_\_ Casing Pressure: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
 Actual Prod. During Test: \_\_\_\_\_ Water-Cut: \_\_\_\_\_ Gas-MCF: \_\_\_\_\_

GAS WELL  
 Actual Prod. Test-MCF/D: \_\_\_\_\_ Length of Test: \_\_\_\_\_ Date Condensate/MCF: \_\_\_\_\_ Gravity of Condensate: \_\_\_\_\_  
 Testing Method (pilot, back pt.): \_\_\_\_\_ Shut-in 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: \_\_\_\_\_  
 PRODUCTION CLERICAL SUPERVISOR  
 Date: 12-12-78

OIL CONSERVATION COMMISSION  
 APPROVED: \_\_\_\_\_ 19\_\_\_\_  
 BY: Jerry Sexton  
 TITLE: Dist 1, Supv.  
 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 logs taken on the well in accordance with RULE 111.  
 All sections of this form must be filled out completely for allowance on new and recompleted wells.  
 Fill out only Sections I, II, III, and VI for changes of ownership, lease name, or number, or transporter, or other such change of conditions.  
 Separate forms O-104 must be filed for each pool in multiple completed wells.