

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API NO. 30-025-26421

Operator Phillips Oil Company	
Address Room 401, 4001 Penbrook Street, Odessa, Texas 79762	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Leamex	Well No. 20	Pool Name, including Formation Undesignated/Queen	Kind of Lease State, Federal or Fee State	Lease No. B-2148
Location Unit Letter <u>B</u> : <u>550</u> Feet From The <u>north</u> Line and <u>1703</u> Feet From The <u>east</u> Line of Section <u>23</u> Township <u>17-S</u> Range <u>33-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	4001 Penbrook St., Odessa, Texas 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rqs. Is gas actually connected? When
	No

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.

Senior Gas Engineer

Neal Porter

March 29, 1984

OIL CONSERVATION DIVISION
APPROVED APR 26 1984, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X				X		X
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
11-03-79	reperf'd 6-29-83		4760'		4661'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
4116.3' GR	Queen		3770'		3706'				
Perforations						Depth Casing Shoe			
3778' - 3801'						4704'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	410'	600 sx Cl H, 2% CaCl.
	(1/4# celloseal, Circ 50 sx.)		
7-7/8"	4-1/2"	4704'	1200 sx TLW, 10% DD.
	(12# salt, 1/4# per sx celloseal, 3#/sx gilsonite, 250 sx Cl H, 8#/sx salt)		

V. TEST DATA AND REQUEST FOR ALLOWABLE (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
55	5 hrs	0	- - -
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
back pressure	960	440	- - -

APR 2 - 1984
O.C.D.
HOBBS OFFICE

STATE OF NEW MEXICO
DEVIATION REPORT

PHILLIPS PETROLEUM CORPORATION
LEAMEX #20

-Sec. 23, T-17S, R-33E

<u>DEPTH</u>	<u>DEVIATION</u>	<u>DEPTH</u>	<u>DEVIATION</u>
410	3/4		
1031	3/4		
1516	1		
2010	1 1/2		
2529	1		
2687	1		
3104	1/2		
3616	1/2		
4110	1		
4627	3/4		
4700	3/4		

RIAL DRILLING COMPANY, INC.

Ray Peterson

BY: Ray Peterson
Manager - Sales

STATE OF TEXAS Y
 Y
COUNTY OF MIDLAND Y

The foregoing instrument was acknowledged before me this 5th day of
December, 19 79, by Ray Peterson on behalf of Rial
Drilling Company, Inc.

My Commission Expires:

GENEVA BAILEY, Notary Public
In and for Midland County, Texas
My Commission Expires 2/21/80

Geneva Bailey
Notary Public in and for Midland County,
Texas