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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

I. API NO. 30-025-26514

Operator Phillips Petroleum Company	
Address Room 401, 4001 Penbrook, Odessa, TX 79762	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Vacuum Gb/SA Unit, Tract 0546	Well No. 001	Pool Name, including Formation Vacuum Gb/SA	Kind of Lease State, Federal or Fee	State	Lease No. B-2073
Location					
Unit Letter B ; 1100 Feet From The North Line and 1600 Feet From The East					
Line of Section 5 Township 18-S Range 35-E, 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"/>	Address (Give address to which approved copy of this form is to be sent)				
Texas-New Mexico Pipeline	P. O. Box 2528, Hobbs, NM 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, Odessa, TX 79762				
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 5	Twp. 18-S	Rge. 35-E	Is gas actually connected? When Yes 2-28-80

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

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 Restv. <input type="checkbox"/>	Diff. Restv. <input type="checkbox"/>
Date Spudded 11-13-79	Date Compl. Ready to Prod. 2-26-80		Total Depth 4900'		P.S.T.D. 4850'			
Elevations (D.F., RKB, RT, GR, etc.) 3969' RKB 3957' GR	Name of Producing Formation Grayburg/San Andres		Top Oil/Gas Pay 4432'		Tubing Depth 4425'			
Perforations 4438-4638'		Depth Casing Shoe 4897'						

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8"	353' (w/300 sxs C1 H w/2% CaCl ₂ , 1/4# Flocele, (Circ 25 sxs to surf)	
8-3/4"	7"	4897' (w/1200 sxs TLW, 12# salt, 10% DD, 1/4# (Flocele, 3 # Gilsonite. Tail in w/400 sxs C1 H w/8# salt and 2% CaCl. Circ 25 sxs to surf	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

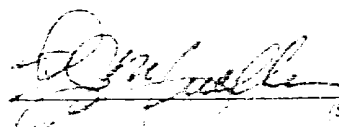
Date First New Oil Run To Tanks 2-28-80	Date of Test 3-7-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test	Oil-Bbls. 112	Water-Bbls. 7	Gas-MCF 54

GAS WELL

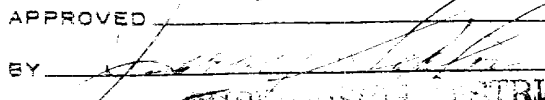
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


W. J. Mueller
(Signature)
Senior Engineering Specialist
(Title)
March 25, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY 
TITLE **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.

