## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SAMTA PE			
FILE			
U.3.0.5.	<u> </u>		
LAMO OFFICE	$\Gamma$		
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROPATION OFFICE			

## OIL CONSERVATION DIVISION P. O. 80 X 2088 SANTA FE, NEW MEXICO 87501

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

## REQUEST FOR ALLOWABLE AND ALTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

·	AUTHOR	IZATION TO TH	KANSE	OK I OIL	, AND INTIO	(AC 000	•		
Operator									
Phillips Pet	roleum	Company							
Address Fillings rec	LOICUM	<u> </u>							
4001 Penbroo	ው በ <b>ፈ</b>	essa. Texas	. 79	9762					
Reason(s) for filing (Check proper bax)	K. Ou	essu, rende	<u> </u>		Other (Please	expiant			
New Woll	Change is	Transporter of:			7.5		1 1	0.6	
Recompletion	Oil		Dry	Gas	Effec	tive I	Date 1-1	-00	
Change in Ownership	Case	nghood Gas	com	densete					
If change of ownership give name	_								
and address of previous owner									
II. DESCRIPTION OF WELL AND LE	ASE					Kind of L		<del></del>	Lease No.
Leese Name	Well Ne.	Pool Name, Inciu Maljamar (	aing Fo	metion				Federal	NM-801
U. S. Minerals		Maijamai C	3D/ 5R			3(414, 7			
Location		• ;							
Unit Latter 0 : 990	_Feet Fre	- The South	line	<u>16</u>	50	_ Feet F	rom The	East	
	_								County
Line of Section 30 Townshi	<u>17−S</u>	Rainq	<u> 33</u>	–E	, NMPM	<u> </u>	Lea	<del></del>	Caunty
III. DESIGNATION OF TRANSPORT	TER OF	<u>OIL AND NAT</u>	<u>URAL</u>	GAS_	Com address s	o which a	sergued com	of this form is	io be sent/
Name of Authorized Transporter of CII		andeneste			Box 2528				88240
Texas-New-Mexico Pipelin		or Dry Gas	_	1.0.	Give address t	o mici e	pproved cory	of this form is	
Phillips 66 Natural Gas	Compos M	GPM Gas Co		tionEF	FETINGORE	brugry	1, 1992	as 79762	
			00.		tually connect		When		
If well produces oil or liquids,		0 17S		Yes			Anr	i1 28, 198	30
dive infation or impat									
If this production is commingied with th	at from an	ny other lease or	boof' &	tive com	urudirud otget	Municer		<del></del>	<del>.</del>
NOTE: Complete Parts IV and V on	reverse s	ride if necessary	•						
NOTE: Complete Fairs IV and V			H	1	01. 0	ONICED	MATION (	ייייייייייייייייייייייייייייייייייייייי	•
VI. CERTIFICATE OF COMPILANCE									
				APPR	aven M	AR 6	- 1986	)	. 19
I hereby certify that the rules and regulations of been complied with and that the information gives	en is true a	nd complete to the	best of	76.6					
my knowledge and belief.		•		BY				RY SEXTON	
· · · · · · · · · · · · · · · · · · ·			i i	DISTRICT I SUPERVISOR					
			II	TITLE					
The state of the s								nce with RUL	
TAVI OXUNDEN		ohnson		If this is a request for allowable for a newly drilled or deepened					
(Signature)				well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
Production Records Superv	isor			All sections of this form must be filled out completely for allow-					
(Title)			11	able on new and recompleted wells.					
January 24, 1986			-	Fill out only Sections L. H. III. and VI for changes of owner, well name or number, or transporter or other such change of condition.					
(Date)	(Date)  Separate Forms C-104 must be filled for each pool in muitiply								
			H		ted wells.			•	1