

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

PERMIT RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 05-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-025-29814

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

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Philmex</u>	Well No. <u>19</u>	Pool Name, including Formation <u>Maljamar R-8772 11/1/88 R-8451</u>	Kind of Lease State, Federal or Fee	Lease No. <u>B-2229</u>
Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>north</u> Line and <u>560</u> Feet From The <u>east</u> Line of Section <u>35</u> Township <u>17-S</u> Range <u>33-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

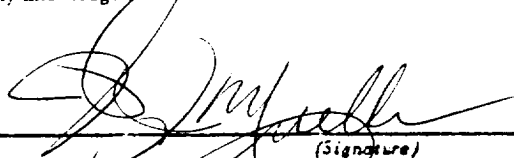
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas-New Mexico Pipeline Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 2528, Hobbs, New Mexico 88240</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook Street, Odessa, Texas 79762</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>C</u>	Sec. <u>36</u>
	Twp. <u>17-S</u>	Rge. <u>33-E</u>
	Is gas actually connected?	When
	<u>Yes</u>	<u>3-25-87</u>

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.


W. J. Mueller
(Signature)
Engineering Supervisor, Reservoir
(Title)
March 31, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 6 1987, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I 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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	DHL Rest'v.
		X		X					
Date Spudded 1-13-87	Date Compl. Ready to Prod. 1-20-87 (Perf'd)		Total Depth 4800'			P.B.T.D. 4618'			
Elevations (DF, RKB, RT, GR, etc.) 4127' RKB, 4116' GR	Name of Producing Formation Grayburg/San Andres		Top Oil/Gas Pay 4335'			Tubing Depth 4608'			
Perforations 4335'-4602'						Depth Casing Shoe 4800'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT			
12-14/8"	8-5/8" 24# K-55			1540'		1000 sx C, 2% CaCl. Circ 195 sx			
7-7/8"	5-1/2" 17# K-55			4800'		1100 sx C, Circ 175 sx			

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 3-08-87	Date of Test 3-25-87	Producing Method (Flow, pump, gas lift, etc.) 2" x 1-3/4" x 16' tbq pump	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test	Oil - Bbls. 80	Water - Bbls. 175	Gas - MCF 40

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