

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. 30-025-30080

I.

Operator Phillips Petroleum Company	
Address 4001 Penbrook St., Room 401, Odessa, TX 79762	
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"/> Casinghead Gas <input type="checkbox"/> Dry 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 Leamex	Well No. 45	Pool Name, Including Formation Maljamar Gb/SA R-8603 3/1/88	Kind of Lease State, Federal or Fee State	Lease No. B-2148
Location				
Unit Letter D	660	Feet From The North	Line and 660	Feet From The West
Line of Section 23	Township 17-S	Range 33-E	, NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

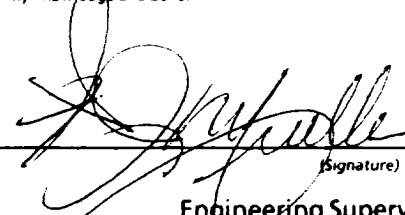
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Petroleum Company - Trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, TX 79762	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> Phillips 66 Natural Gas Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, TX 79762	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 24
	Twp. 17S	Rge. 33E
	Is gas actually connected? YES	When 12-07-87

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)
1/6/88
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 11 1988, 19
BY Orig. Signed by
Paul Kautz
Geologist
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 allow-
able 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 multiple

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11-05-87	Date Compl. Ready to Prod Perf'd 11-30-87		Total Depth 4800'			P B T D 4761'			
Elevations (DF, RKB, RT GR, etc.) 4150' RKB, 4141' GR		Name of Producing Formation Gb/SA		Top Oil/Gas Pay 4336'			Tubing Depth 4602'		
Perforations 4336'-4594'							Depth Casing Shoe 4800'		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12-1/4"		8-5/8" 24# K-55		1489'			1000 sx C, 2% CaCl ₂ Circ.		
							200 sx		
7-7/8"		5-1/2" 15.5# K-55		4800'			900 sx C w/ 5% salt		
							450 sx C Neat. Circ. 110 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.)

OIL WELL

Date First New Oil Run To Tanks 12-07-87	Date of Test 12-28-87	Producing Method (Flow, pump, gas lift, etc.) 2" X 1-1/4" X 16' pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls. 24	Water-Bbls. 15	Gas-MCF 189

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