

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

I. 30428
API No. 30-025-30097

Operator
Phillips Petroleum Company

Address
4001 Penbrook Street, Odessa, Texas 79762

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Leamex	Well No 51	Pool Name, including Formation Maljamar Grayburg/SA	Kind of Lease State, Federal or Fee State	Lease No B-2148
Location				
Unit Letter 0	660	Feet From The South	Line and 1980	Feet From The East
Line of Section 21	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, Texas 79762			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762			
If well produces oil or liquids, give location of tanks	Unit 0	Sec 21	Twp 17-S	Rge 33-E
is gas actually connected?			When	
yes			9-03-88	

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

NOTE: Complete Parts IV and V on reverse side if necessary

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the information furnished on this form is true and complete to the best of my knowledge and belief.


W. J. Mueller
Engineering Supervisor, Reservoir
(Title)
9/9/88
(Date)

OIL CONSERVATION DIVISION

APPROVED **SEP 15 1988** 19
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 Form C-104 must be filed for each well to be tested

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 7-24-88	Date Compl. Ready to Prod Perf'd 8-9-88		Total Depth 4800'		P B T D 4755'				
Elevations (DF, RKB, RT, GR, etc.) 4190' RKB, 4189'-DF, 4178'GR		Name of Producing Formation Grayburg-SA		Top Oil/Gas Pay 4556'		Tubing Depth 4531'			
Perforations Perf'd 2 SPF from 4556'-4568' 12'-24 shots; 4149'-4454'						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		1470'		1000 sx "C" 2% CaCl ₂				
					Circ. 164 sx				
7-7/8"	5-1/2" 15.5# K-55		4800'		1500 sx Howco Lite, 5% salt +				
					300 sx "C" Neat. Circ. 141 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 8-24-88	Date of Test 9-03-88	Producing Method (Flow, pump, gas lift, etc.) 2-1/2" X 1-1/2" X 16' pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls 43	Water-Bbls 26	Gas-MCF 35

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

SEP 11

ROCK

