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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | |
|--|-------------------------------------|
| Operator PHILLIPS PETROLEUM COMPANY | Well API No. 30-025-30778 |
| Address 4001 PENBROOK STREET, ODESSA, TEXAS 79762 | |
| Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> Other (Please explain) <i>show gas connection date</i> | |

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------------|---|--|----------------------------|
| Lease Name Elliams Federal | Well No. 9 | Pool Name, Including Formation Maljamar Grayburg San Andres | Kind of Lease State, Federal or Fee | Lease No. NM-801 |
| Location Unit Letter A : 989 Feet From The North Line and 660 Feet From The East Line Section 34 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 checked="" 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) 601 Penbrook St., Odessa, Texas 79762 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit A | Sec. 34 | Twp. 17-S | Rge. 35-E | Is gas actually connected? YES | When? 08-07-90 |

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 Res'v <input type="checkbox"/> | Diff Res'v <input type="checkbox"/> |
| Date Spudded 02-16-90 | Date Compl. Ready to Prod. 05-19-90 | | Total Depth 4750' | | P.B.T.D. 4580' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4144' GR | Name of Producing Formation Grayburg San Andres | | Top Oil/Gas Pay 4301' | | Tubing Depth 4542' | | | |
| Perforations 4301'-4564' | | | | | Depth Casing Shoe 4750' | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12-1/4" | 8-5/8" 24# K55 | | 1519' | | 1000 sx "C", 2% CaCl | | | |
| | | | | | Circ. 200 sx | | | |
| 7-7/8" | 5-1/2" 15.5# K55 | | 4750' | | 1000 sx "C" 65/35 Poz | | | |
| | | | | | Circ. 200 sx | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank 05-19-90 | Date of Test 05-24-90 | Producing Method (Flow, pump, gas lift, etc.) 2" x 1-1/4" x 16' insert pump | |
| Length of Test 24 hrs. | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. 155 | Water - Bbls. 131 | Gas - MCF 70 |

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. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
J. L. Maples
Printed Name
J. L. Maples, Asst. Regulation & Proration
Title
August 8, 1990
Date
915/367-1411
Telephone No.

OIL CONSERVATION DIVISION

Date Approved

By

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.