

OIL CONSERVATION DIVISION
P. O. BOX 2086
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Phillips Petroleum Company	
Address 4001 Panbrook Street, Odessa, Texas 79762	
☐ New Well ☐ Recompletion ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Casinhead Gas ☐ Dry Gas ☐ Condensate
Other (Please explain) Workover and reactivation of temporarily abandoned well.	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lea	Well No. Pool Name, including Formation 9 Vacuum Gb/SA	Kind of Lease State, Federal or Fee State	Lease No. B-4118
Location Unit Letter I , 1980 Feet From The South Line and 660 Feet From The East Line of Section 20 Township 17-S Range 34-E , N.M.P.M., Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

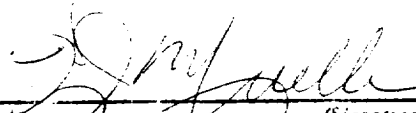
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Casinhead Gas ☒ or Dry Gas ☐ Phillips 66 Natural Gas Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) EFFECTIVE: February 1, 1992 4001 Panbrook Street, Odessa, Texas 79762
If well produces oil or liquids, give location of tanks. Unit P Sec. 29 Twp. 17-S Rge. 34-E	is gas actually connected? yes 1-12-87

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.



(Signature)
W. J. Mueller

Engineering Supervisor, Reservoir

(Title)
February 3, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED **FEB 9 1987**, 19
BY **Orig. Signed by**
Paul Kautz
TITLE **Geologist**

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-100 must be filed for each pool in multiply completed wells.

III. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	Water Well	Other	Unspec.	Flow Meter	Some Restr.	Full Restr.
		X			X				
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
2-19-62	reperf'd 12-02-86		4800'		4782'				
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
4084' GR, 4092' RKB	Grayburg/San Andres		4426'		-				
Perforations						Depth Casing Shoe			
4426'-4743'									
TUBING, CASING, AND CEMENT DATA									
TUBING		CASING		CEMENT		SHOCKS STRONG			
12 1/4"	8-5/8", 24#		343'		300 .sx Reg 2%. Circ 5				
					sx to surface				
7 7/8"	5-1/2", 23#		4797.77'		400 sx Reg.				
					TOC @ 3013'				

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 16 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (flow, pump, gas lift, etc.)	
12-23-86	1-12-87	2" x 1 1/2" x 16' 3-tube sand pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	-	-	-
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	6.2	4.1	12

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Chart-in)	Casing Pressure (Chart-in)	Choke Size

RECEIVED
FFB 6 1987
OCD
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