STATE UP NEVY WILLAUS BY AND MINERALS DEPARTMENT DIST MINUTION 1. F 1.1.0.1. AND DFFICE -PIRATOR

Production Records

T. 1 . 20 1095

(Title)

PORATION OFFICE

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PHILLIPS PETROLEUM COMPANY diress 79762 Odessa, Texas 4001 Penbrook Other (Please explain) (cuson(s) for filing (Check proper box) Change in Transporter of: Changed from Dry Gas Oil Recompletion Phillips Oil Company August 1, 1985 Condensate Casinghead Gas Change in Ownership 79762 change of ownership give name Phillips Oil Company 4001 Penbrook, Odessa, Texas nd address of previous owner ESCRIPTION OF WELL AND LEASE Lease N well No. Pool Name, including Formation Kind of Lease B-4118 Vacuum (G-SA) State State, Federal or Fee 19 Lea Location 1980 Feet From The south Line and 660 east _ Feet From The Coun <u>34-E</u> 30 T. anship 17-S Range Line of Section ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil XX or Condensate P. O. Box 1510 Midland, Texas 79701

Address (Give address to which approved copy of this form is to be sent) Texas New Mexico Pipeline Company Name of Authorized Transporter of Casinghead Gas 💢 or Dry Gas 🗀 79762 4001 Penbook, O Odessa, Texas Phillips Petroleum Company Rqe. Unit If well produces oil or liquids, yes 8-18-82 29 :17S 34E f this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Same Res'v. Diff. Re Plug Back Workover New Well Gas Well Designate Type of Completion - (X) P.B.T.D. Date Compl. Ready to Prod. Diste Spudded Tubing Depth Top Oll/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE 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 able for this depth or be for full 24 hours) O'L WELL Producing Method (Flow, pump, gos lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bbis. Oil-Bals. Actual Prod. During Test GAS WELL Gravity of Condensate Bais. Condensate/MMCF Length of Test Actual Prod. Teet-MCF/D Choke Stre Casing Pressure (Shat-in) Tubing Presews (Shut-in) seating Method (putos, back pr./ OIL CONSERVATION DIVISION CERTIFICATE OF COMPLIANCE AUG - 5 1985 _, 19 _ 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. EV JERRY SEXTO -ORIGINAL S BY__ DISTRICT | SUPERVISOR TITLE _ This form is to be filed in compliance with RULE 1104, If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a labulation of the devi-tests taken on the well in accordance with MULE 111. В. All sections of this form must be filled out completely for all able on new and recompleted walls.

Fill out only Sections I. II. III. and VI for thenges of ow

AUG -1 1985