	US. OF COPIES ALCEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS OPERATOR PROPATION OFFICE	REQUEST	ONSERVATION COMMIS N FOR ALLOWABLE AND INSPORT OIL AND NATURAL (	Form C -104 Superactive Old C-104 and C+11 Ettective 1-1-85 GAS	
	Operator PHILLIPS PETROLEUM COMPANY				
	Address 4001 Penbrook Street, Odessa, Texas 79762				
	Reason(s) for filing (Check proper box, New Well	Order No. 58/1 Change			
	Recompletion	Recompletion Cil Dry Gas Of lease flame because of billing at the because of billing at theb			
	f change of ownership give name and address of previous owner Mobil Oil Corp., P. O. Box 633, Midland, Texas 79702				
	. DESCRIPTION OF WELL AND LEASE				
	Lease Name East Vacuum GB-	ease Name East Vacuum GB-SA Veli No. Pool Name, including Formation Kind of Lease Lease to			
·· •	Unit Tract No. 2175 002 Vacuum GB-SA State, Accardon Location				
Unit Letter M; 660 Feet From The South Line and 660 Feet From The West Line of Section 21 Township 17-S Range 35-E , NMPM, Lea				The West	
				County	
III.	I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oli Texas-New Mexico Pipe		Address (Give address to which appro P.O. Box 2528, Hobbs,		
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Phillips Petroleum Company		Adaress (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, Unit Sec. Twp. Pge. Is gas actually connected? When		en		
	give location of tanks. K 21 175 35E Yes 12-1-78				
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Dill. Resty.	
	Designate Type of Completic		Total Depth	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.			
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations Depth Casing Shoe			Depth Casing Shoe	
	TUBING, CASING, AND CEN				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		•			
V.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, stc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oll-Bbis.	Water - Bbls.	Gas-MCF	
		· · · · · · · · · · · · · · · · · · ·			
	GAS WELL				
	Actual Frod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and regulations of the Oll Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED 19		
			BYIOTO FORM		
			TITLE INA This form is to be filed in compliance with RULE 1104.		
	J. E. Wilson		If this is a request for allowable for a newly drilled or deepened multiple form must be accompanied by a tabulation of the deviation		
	(Signature) PRODUCTION CLERICAL SUPERVISOR		All sections of this form must be filled out completely for allow-		
	(Ti		able on new and recompleted wells. Fill out only Sections I. 11. 111. and VI for changes of owner, well name or number, or transporter, or other auch change of condition Separate Forms C-104 must be filed for each pool in multiply completed wells.		
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