Post RIGHT 10H ---BFFICE

August 1, 1985

(Date)

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 8750

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ATION OFFICE PHILLIPS PETROLEUM COMPANY 79762 4001 Penbrook Odessa, Texas Other (Please explain) Ressen(s) for liling (Check proper box) Change in Transporter of: - Well Changed from Dry Cas Phillips Oil Company August 1, 1985 cample 1106 Castnahead Gas Condensate 🖚 In Ownership 💢 Odessa, Texas 79762 PHILLIPS OIL COMPANY 4001 Penbrook ange of ownership give name Saddress of previous owner. DESCRIPTION OF WELL AND LEASE Lease ! Kind of Lease well No. Pool Name, including Formation Name Vacuum Abo Unit State, Federal or Fee Fee 600105 Vacuum Abo Reef Battery 4 Tract 2 2310 660 Feet From The North Line and Com Letter C Cour 35 E , NMPM. 17 S Range T. waship___ Lime of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Ee of Authorized Transporter of Cil XXX P. O. Box 2528 Hobbs, New Mexico 88240 Texas New Mexico Pipe Line Company Address (Give address to which approved copy of this form is to be sent) ef Authorized Transporter of Casinghead Gas 💢 or Dry Gas 🗍 4001 Penbrook Odessa, Texas 79762 Phillips Petroleum Company When is gas octually connected? Unit ; 35E ... NR yes E well produces oil or liquids, 17S 26 M care location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers Plug Back | Same Res'v. Diff. Re COMPLETION DATA Workover Ott Well Gas Well New Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Tubing Depth Top OII/Gas Pay Name of Producing Formation Elections (DF, RKB, RT, GR, etc.) Death Casing Shoe Partmettons 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 be exceed top of able for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Longth of Teet Water - Bals. OH - Bale. Actual Prod. During Test GAS WELL Gravity of Condensate Bhie. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shut-in) Tubing Presewe (Shut-in) Teeting Method (putot, back pr.) OIL CONSERVATION DIVISION . CERTIFICATE OF COMPLIANCE AUG 12 1985 APPROVED. 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. ORIGINAL SIGNED BY JEERY SEXTON ·BY_ DISTRICT I 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 desp well, this form must be accompanied by a tabulation of the devi-tests taken on the well in accordance with RULE 111. (Signature) All sections of this form must be filled out completely for a Controller able on new and recompleted wells. (Title) Fill out only Sections I. II. III, and VI for changes of o well name or number, or transporter, or other such change of cond

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