and the second			- <u> </u>		
STATE OF NEW MEXICO	•	•		Form C-104	
AND MINERALS DEPARTMENT OIL CONSERVATION DIVISION				Revised 10-1-78	
Distribution P. O. BOX 2088 SANTA FE SANTA FE, NEW MEXICO 87501					
Ph.8 U.5.(6.6.					
LAND UPFICE REQUEST FOR ALLOWABLE					
AND AND AND ARETHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
Phillips Oil Company					
4001 Penbrook Street, Odessa, Texas 79762					
Reason(s) for filing (Check proper bas) Other (Please explain)					
New Well	New Well Change in Transporter el: Becompletion Cat Dry Gas Effective 12/01/83				
Change in Ownership	Casinghead Gas Conder	ndens ate			
If change of ownership give name Phillips Petroleum Company, 4001 Penbrook Street, Odessa, Texas 79762					
and address of previous ownerPHILLIDS_PELFOTENIIL COMPANY, 4001 LENDLOCK BELECC, GRESDA, ZEMAD					
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including Fo		nd of Lease	Lease Na.	
Vacuum Abo Unit Battery		ef Ste	te, Federal or Fe	• State <u>B-2735</u>	
Location Tract 4 Unit Letter B : 990 Feet From The North Line and 1650 Feet From The East					
Line of Section 26 T. mahip 175 Range 35E , NMPM, Lea County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter at Cli X or Condensate Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipe Line Company P. O. Box 2528, Hobbs, New				Mexico 88240	
Name of Authorized Transporter of Casingheed Gas A or Dry Gas Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook Street, Odessa, Texas 79762			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	<u>34, ICA35 ///06</u>	
give location of tanks. M 26 17S 35E Yes NR					
If this production is commingled with that from any other lease or pool, give commingling order number: <u>COMPLETION DATA</u> ¹ Oil Well ² Ggs Well ¹ New Well ¹ Workover ¹ Deepen ¹ Plug Back ¹ Same Res'v. ¹ Diff. Res'v.					
Designate Type of Completion					
Date Spudded	Date Cample Ready to Prod.	Total Depth	P.B.	T:D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubi	ng Depth	
Perforations		I	Dept	h Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD					
HOLESIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET			
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 allow- oil WELL					
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	mp, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Chok	e 512e .	
Actual Prod. During Test	Oil-Bhie.	Wgter-Bhie.	Gas	MCF	
GAS WELL				·	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grav	ity of Condeneate	
Teeting Method (pitot, back pr.)	Tubing Pressure (shut-is)	Casing Pressure (Shut-1a) Chek	• SI2•	
CERTIFICATE OF COMPLIAN			SERVATION	DIVISION	
I hereby certify that the rules and regulations of the Oll Conservation		APPROVEDFEB 6 198419			
above is true and complete to the best of my knowledge and belief.		DISTRICT I SUPERVISOR			
		TITLE			
Chine L. B. Rush		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens.			
(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for allow able on new and recompleted wells.			
Production Records Supervisor					
December 29, 1983		Fill out only Sections 1, 14, 111, and VI for changes of owner well name or number, or transporter, or other such change of condition			
(De	Separate Forms C-104 must be filed for each pool in multipi completed wells.				
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