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SANTA FE

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U.S.G.S.

LAND OFFICE

TRANSPORTER OIL

GAS

OPERATOR

PRORATION OFFICE

OIL CONSERVATION COMMISSION

Form C-104

Supersedes Old C-104 and C-

Effective 1-1-65

NATURAL GAS

I. Operator: PHILLIPS PETROLEUM COMPANY

Address: 4001 Penbrook St. Odessa, Texas 79762

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Other (Please explain): Order No. 5871 Change of lease name because of Unitization. Formerly: Phillips - Santa Fe # 43

If change of ownership give name and address of previous owner: Phillips Petroleum Co., 4001 Penbrook St., Odessa, Texas 79762

II. DESCRIPTION OF WELL AND LEASE

Lease Name: East Vacuum Unit Tract No. 2622 043 Vacuum Grayb

Kind of Lease: State, Federal or Fee

Lease No.: B-1497

Location

Unit Letter D 990 Feet From The North 660 Feet From The West

Line of Section 26 Township 17S Range 35E NMPM Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate: Texas-New Mexico Pipe Line

Address (Give address to which approved copy of this form is to be sent): Box 1328, Hobbs, N.M. 88240

Name of Authorized Transporter of Casinghead Gas or Dry Gas: Phillips Petroleum Company

Address (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, give location of tanks: F 26 17S 35E

Is gas actually connected? Yes

When: 12-1-78

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| Designate Type of Completion (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

| | | | |
|---|---|---|---|
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| Perforations | | | Depth Casing Shoe |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

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 24 hours)

OIL WELL

| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
|---|---|---|---|
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

PRODUCTION CLERICAL SUPERVISOR

12-12-78

OIL CONSERVATION COMMISSION

APPROVED DEC 19 1978, 19

BY Orig. Signed By Jerry Sexton

TITLE Dist. 1, Supv.

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-104 must be filed for each pool in multiply completed wells.