Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Departm.

Form C-104 Revised 1-1-89 See Instruction

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

L	T	O TRAN	NSPC	ORT OIL	AND NAT	URAL GA	<u>\S</u>					
Operator	1 2 -											
Phillips Petroleum Company 30-025-02900										 		
Address 4001 Penbrook Street,	Odessa	. Texa:	s 7	9762								
Reason(s) for Filing (Check proper box)		,			X Othe	t (Piease expla	ún)					
New Well		Change in 7	-			ange in			ell Numb	er from		
Recompletion	Oil Contactord		Dry Gai Conden	_		ate 4-27 fective		No. 6				
Change in Operator X	Casinghead						,		,			
and address of previous operator Chevi	ron, U.S	5.A. I	nc.,	Box 16	35, Hous	ston, TX	77251					
II. DESCRIPTION OF WELL	AND LEAS	SE										
Lesse Name Tract 27	Tract 27 Well No. Pool Name, Including Formation						Kind of Lease State Lease No. State Property (Archive)					
Vacuum Glorieta East	Unit	3	vacu	um GIOI	rieta				<u> </u>	.0-10 1		
Location	. 1980)	E E-	The Sc	outh Line	-mat 218	RO E	et From The .	East	Line		
Unit Letter												
Section 27 Township	17-s		Range	35-E	, N	IPM,	Lea	<u> </u>		County		
III. DESIGNATION OF TRAN	CDADTED	OF OU	E A NI	D NATTI	DAT GAS							
Name of Authorized Transporter of Oil		or Condens			Address (Give	address to wh	rich approved	copy of this f	orm is to be se	nt)		
Texas-New Mexico Pipeline Company P. O. Box 42130, Houston, Texas 77242												
Name of Authorized Transporter of Casinghead Gas X or Dry Gas						Address (Give address to which approved copy of this form is to be sent)						
GPM Gas Corporation						4044 Penbrook Street, Odessa, Texas 79762						
If well produces oil or liquids, give location of tanks.			Twp.	Rge.	is gas actually Yes	connected?	When NR	7				
If this production is commingled with that f	n any other		175 1001. priv			per:	1 1410					
IV. COMPLETION DATA	.0		,									
	<i>a</i> n	Oil Well	1	Gas Weli	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion		Pendu to			Total Depth		<u> </u>	P.B.T.D.	L			
Date Spudded Date Compl. Ready to Prod.								1 a.				
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth				
								Depth Casing Shoe				
Perforations								Depth Casit	ig Shoe			
	71	IRING	CASI	NG AND	CEMENTI	NG RECOR	D			· · · · · · · · · · · · · · · · · · ·		
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
11000 0100												
												
					ļ							
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE		<u> </u>			<u></u>				
OIL WELL (Test must be after n	ecovery of low	al volume d	of load	oil and must	be equal to or	exceed top alle	owable for thi	s depth or be	for full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of Test				Producing M	ethod (Flow, pr	ump, gas lift,	etc.)				
	<u> </u>							Choke Size	Choke Size			
Length of Test	Tubing Pressure					ıre						
Actual Prod. During Test	Oil - Bbis.				Water - Bbis.			Gas- MCF				
GAS WELL		<u></u>										
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate				
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size				
											VL OPERATOR CERTIFIC	ATE OF
				ICE	11	OIL CON				ON		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						Approve	nen	1 7 10	12			
is true and complete to the best of my	knowledge an	d belief.			Date	Approve	ed	10 3				
1	$\gamma \gamma l_{\alpha}$	10-	L	/	H							
lisignature The first the second seco						ORIGINAL S DIST	IGNED BY	JERRY SE	XTON			
/ ⁷ L.M. <u>Sanders - Super</u>	vison Re	egulate		Affairs	s	DIST	RICT I SUA	ERVISOR				
Printed Name	`,	015\ 3	Title	1.400	Title							
11-22-93 Date		915) 3 Telep	phone i									

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 4) Separate Form C-104 must be filed for each pool in multiply completed wells.