DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPET/ TOR			
PROPATION OFFICE			

NEW MEXICO OIL CONSERVATION COMPT SION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-1;
Effective 1-1-65

U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND	NATURAL (GAS	•03
TRANSPORTER GAS					
PROPATION OFFICE					
Character Phillips Petro	leum Company				
Address	St., Odessa, Texas 79762	2			
Reason(s) for filing (Check proper box)	Other (Pleas	e explain)	· · · · · · · · · · · · · · · · · · ·	
New We!1 Recompletion	Change in Transporter of: Oil Dry Ga	ıs 🔲	`.		
Change in Ownership	Casinghead Gas Conder	nsate Re1	ocation o	f tank battery	
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND		ormation	Kind of Lease		Lease No.
Unit, Tract No. 2923	052 Vacuum G		State, Kadena	K.XXX.	B-1501
Location Unit Letter G : 19	77 Feet From The North Lin	• and 1979	Feet From T	rhe East	<u>-</u>
Line of Section 29 To	wnship 17–S Range	35-E , NMPN	1,	Lea	County
. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	s			
Name of Authorized Transporter of Oil Texas-New Mexico Pipel	or Condensate	Address (Give address P. O. Box 252)			to be sent)
Name of Authorized Transporter of Car	singhead Gas 💢 💮 or Dry Gas 🦳	Address (Give address	to which approv	ed copy of this form is	
Phillips Petroleum Comp	Unit Sec. Twp. Pge.	Is gas actually connect			· · · · · · · · · · · · · · · · · · ·
give location of tanks.	I 29 17-S 35-E	Yes		9-2-80	
If this production is commingled wi . COMPLETION DATA	th that from any other lease or pool,	New Well Workover	Deepen	Plug Back Same Re	stv. ¹ Diff. Restv.
Designate Type of Completion	on – (X)	i i i i i i i i i i i i i i i i i i i	1	1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!l/Gas Pay		Tubing Depth	
Perforations				Depth Casing Shoe	
	TUBING, CASING, AND	T			
HOLE SIZE	CASING & TUBING SIZE	DEPTHS	E.T	SACKS CE	MENI
4				<u> </u>	
. TEST DATA AND REQUEST FOR OIL WELL	able for this de	fter recovery of total volu pth or be for full 24 hours	•)		exceed top allow
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flou	u, pump, gas iij		
Length of Test	Tubing Pressure	Casing Pressure		Choke Size	
Actual Pred. During Test	OII-Bbls.	Water - Bble.		Gas-MCF	•
1	<u> </u>	J		· · · · · · · · · · · · · · · · · · ·	
Actual Prod. Tool-MCF/D	Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensat	•
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Size	
CERTIFICATE OF COMPLIAN	CE	OIL (TION COMMISSION	
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	SEP 1	1 1980	, 19
Commission have been complied washing in true and complete to the	with and that the information given :	a			
	,	TITLE		· .	
5/18	5 0	This form is to	be filed in c	ompliance with NUL	E 1104. led or deepened
Signal (Signal	1(4/4)	well, this form mus	t be accompany well in accompany	dance with MULE 1	of the dealerson
Clerical and Services	Supervisor	All sections of	this form mul completed we	it he filled out comp lis.	lotely for allow-
9-4-80)	f cus ans only	Sections I, II,	III. and VI for chi	inges of owner,

All sections of this form must be tried out completely to allow able on new and recompleted wells.

Fill out only Sections 1, 11, 111, and VI for changes of country, 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.