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GY AND MINERALS DEPARTMENT OIL CONSERVATION DIVISION				Form C-10 Revised 1	Form C-104 Revised 10-1-78	
*** ** ****** *******	OIL CONSERVA					
0181 AIPUT 10H	SANTA FE, NEW				•	
SANTA PE	SHILLY LET IN		•			
	REQUEST FOR					
DPENATOR X	ANI		AL GAS			
Operation Operation Operator Phillips Oil Company			- 			
Address	707(2			_		
4001 Penbrook Street	, Odessa, Texas 79762	Other (Please	esplain)	<u> </u>		
Reason(s) for filing (Check proper box)	Change in Transporter of:					
	Cut Dry Gas	Effect	tive 12/01/	/83		
Change in Ownership	Casinghead Gas Condens	pate			·····	
			_	a to main a	70767	
If change of ownership give name and address of previous owner	Phillips Petroleum Compar	ny, 4001 Penbro	ok Street,	Odessa, Texas	79762	
DESCRIPTION OF WELL AND I	Vell No.   Pool Name, Including For	rmation	Kind of Lease State, Federal (	<b>»F</b> •• State	Lecee No. B-1845	
Vacuum Abo Unit Battery				<u> </u>		
Location Tract 1 Unit LetterJ:198	0 <u>()     Feet From The     South    Line</u>	and <u>2310</u>	Feet From Th	• <u>East</u>	•	
24 -	mship 17S Range 3	5E , NMPM	Lea		County	
Line of Section 34 T. A	anantip 270 recenter of		Ŷ	······································		
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S Address (Give address	to which approve	d copy of this form is	to be sent)	
Name of Authorized Transporter of Cil		P. O. Box 252				
Texas-New Mexico Pipe I Name of Authorized Transporter of Cas	tinchead Gos X or Dry Gas	Address (Give address	to which approve	d copy of this form is	to be sentj	
Phillips Petroleum Comp	4001 Penbrook Street, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	will produces all or liquids, Unit , Sec. Twp. Rge. Is gas actually ca			ected? When t		
	th that from any other lease or pool, g	give commingling orde	r number:			
COMPLETION DATA		New Well Workover	Deepen	Plug Back Same Re	s'v. Diff. Restv.	
Designate Type of Completio					1 1	
Date Spudded	Date Compl. Ready to Prod	Total Depth	<b>L</b>	P.B.T.D.	· · · · · · · · · · · · · · · · · · ·	
Date Shapeed				Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay		Inplud Debry		
				Depth Casing Shoe		
Periorations		-			······································	
	TUBING, CASING, AND	CEMENTING RECON	20	SACKS CE		
HOLE SIZE	CASING & TUBING SIZE	DEPTH S	ET	SACKS CE	MENI	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be af	ter recovery of socal vol	ume of load oil a	nd must be equal to or	esceed top allow	
OIL WELL	able for this de	pth or be for full 24 hour Producing Method (Flo	<b>#</b> )			
Date First New Oil Run To Tanks	Date of Test					
Length of Test	Tubing Pressure	Casing Pressure	•	Choke Size	•	
				Gas-MCF		
Actual Prod. During Test	Cil-Bhie.	Water-Bbls.				
L		<u> </u>		<u>,                                     </u>	•	
GAS WELL						
Actual Prod. Teet-MCF/D	Length of Test	Bbis. Condensate/MM	F	Gravity of Condeneat		
		Cosing Pressure (Shu	t-in)	Choke Size		
Teeting Method (puot, back pr.)	Tubing Pressure ( shat-in )					
CERTIFICATE OF COMPLIAN	OIL CONSERVATION DIVISION					
	and the oil Committee	APPROVED FE	<u>B6</u> 19	04	, 19	
	regulations of the Oil Conservation and that the information given					
above is true and complete to the	ORIGINAL SIGNED BY JERRY SEXTON					
•	TITLE					
and A	This form is to be filed in compliance with RULE 1104.					
BKush/	If this is a request for allowable for a newly drilled or deepens.					
(Sign	i seeks taken on the well in accordance with the at the					
Production Rec	All sections of this form must be filled out completely for allow					
December	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					
	ale)		et of flaushour	be filed for each		
	•	Separate For				

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