	DISTRIBUTION SANTA FE		CONSERVATION CON			ld C+104 and C+1	
	LAND OFFICE	AND Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	TRANSPORTER OIL GAS						
1.	PROPATION OFFICE	-1			·		
	Phillips Petroleum Company						
	4001 Penbrook St., Odessa, Texas 79762						
	Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of:						
	Recompletion Change in Ownership	Cil Dry Gas Casinghead Gas Condensate Relocation of tank battery					
	If change of ownership give name						
	and address of previous owner						
11.	DESCRIPTION OF WELL AND		°ormation	Kind of Lease	·····	Lease No.	
	Unit, Tract No. 3450	6 001 Vacuum G	/SA	State, Redenervery	£xx	<u>B-2273</u>	
	Unit Letter C ; 660 Feet From The North Line and 1980 Feet From The West						
	Line of Section 34 To	wnship 17-S Range	35-Е , NM!	РМ,	Lea	County	
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS Address (Give addres	to which approved	conv of this form is	lo ha card	
	 Texas-New Mexico Pipel	28, Hobbs, NM	1 88240	·			
	Name of Authorized Transporter of Co Phillips Petroleum Com		nhead Gas 💢 or Dry Gas 🚞 Address (Give address to which approved copy of this form is to be sent)				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Ege. I 33 17-S 35-E	Is gas actually conne				
	If this production is commingled wi	th that from any other lease or pool,	give commingling ord	ler number:	12-1-78		
IV.	COMPLETION DATA Designate Type of Completi	Cil Well Gas Well	New Well Workove	Deepen Pi	ug Back Same Res	s'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	Tu	ibing Depth		
	Perforations			De	epth Casing Shoe		
	HOLE SIZE	TUBING, CASING, ANI CASING & TUBING SIZE	D CEMENTING RECORD		SACKS CEMENT		
	4			· · · · · · · · · · · · · · · · · · ·			
	TEST DATA AND REQUEST F		fter recovery of total vo		nust be equal to or e	xceed top allow-	
Í	OIL WELL Date First New Oil Bun To Tanks	pth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)					
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size		
	Actual Pred. During Tost	Oil-Bbls.	Water - Bbls.	Ga	IS - MCF		
]	
r	GAS WELL GAS WELL Bbls. Condensate/MMCF Gravity of Condensate						
	Actual Prod. Test-MCF/D	Length of Test			-		
ſ	Teating Mathod (pitol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in) Ch	oke Size		
VJ.	CER OF COMPLIAN	OIL CONSERVATION COMMISSION					
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED Carter Barter , 19				
	Commission have been complied v showe is true and complete to the	BY Orig. Signed by John Ranyan 'TITLE Geologist					
	Elm.s	This form is to be filed in compliance with NULE 1104. If this is a request for slowable for a newly dilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111. All soctions of this form must be filled out completely for slow- able on new and recompleted wells.					
-	(Sieni						
•	<u>Clerical and Services</u>						
		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.					
	aj		Separate For completed wells.	ns C-104 must be	Illed for each po	ot n omnibi-	