_	· · · · · · · · · · · · · · · · · · ·			19
	DISTRIBUTION		SERVATION COMMISSION	Form C-104 Supersedex Old C-104 and (.+110
			AND	Ellective 1-1-65
	J.S.G.S.		SPORT OIL AND NATURAL GAS	
	AND OFFICE			
	RANSPORTER OIL			
	GAS	-		
	OPERATOR			
	PHILLIPS PETROLEUM COMPANY			
	4001 Penbrook Street, Odessa, Texas 79762 (eason(s) for filing (Check proper box) Other (Please explain) Order No. 5871 Change			
	lew Well	Change in Transporter cf:		use of Unitization.
	Recompletion	Cil Dry Gas	Formerly: Shell S	State-T #4
- 1	Casinghead Gas Condensate			
11	change of ownership give name	Shell Oil Company, P. O.	Box 1509, Midland, Texas	79702
u. <u>r</u>	ESCRIPTION OF WELL AND L	EASE	mation Kind of Lease	Lease No.
Í	Lesse Name East Vacuum GB-S Hnit Tract No. 3315	004 Vacuum GB-SA		-X-X-X
+	Unit Tract No. 3315		······································	
	P 990 Feet From The South Line and 990 Feet From The East			
			_	County
			35-Е , ммрм, Lea	
n . 1	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil 🕱 or Condensate 🗌 Address (Give address to which approved copy of this form is to be sent)			
	Texas-New Mexico Pipe	Line	P.O. Box 2528, Hobbs, M	d copy of this form is to be sent)
ł	None of Authorized Transporter of Casinghead Gas X or Dry Gas		Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762	
	Phillips Petroleum Com		is gas actually connected? When	
	If well produces oil or liquids, The second state of the second st			
	give location of tanks. J 33 17-5 55-E 200 If this production is commingled with that from any other lease or pool, give commingling order number:			
. ۲	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Dill. Res'v.
	Designate Type of Completio	n = (X)		1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, CR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, UK, Ele.)			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
			DEPTH SET	SACKS CEMENT
	HOLESIZE	CASING & TUBING SIZE		
		•••••		
	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 allow able for this depth or be for full 24 hours)			
۷.	TEST DATA AND REQUEST FOR ALLOWABLE (1 est must be depth or be for full 24 hours) able for this depth or be for full 24 hours) OII, WEI.L Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)			;, elc.)
		Tubing Pressure	Casing Pressure	Choke Size
	Length of Test		Water - Bbis.	Gas - MCF
	Actual Prod. During Test	Oil-Bbis.		
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Fred. Test-MCF/D	Length of feet		
	Testing Method (pitot, back pr.)	Tubing Pressure (Bhut-in)	Casing Pressure (Shut-in)	Choke Size
VI	CERTIFICATE OF COMPLIAN	 ICE	OIL CONSERVA	TION COMMISSION
	the Oli Conservation		APPROVED DEC SIgn	ed bi
	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.		OIL CONSERVATION COMMISSION DEC23 976 APPROVED Drig. Signed by BY Jerry Sexton BY Drig. Supra	
			Dist 1, Supv.	
		1	TITLE	
			This form is to be filed in	compliance with HULE 1104.
	En Ane		If this is a request for sliowable for a newly drilled or deepend 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 sllow able on new and recompleted wells.	
	(Signature)			
	PRODUCTION CLERICAL SUPERVISOR			
	17, 1-78			
	(Date)		Fill out only Sections I. II. III, and VI to thanks of condition well name of number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multipl	
	() 	,	Separate Forma C-104 mus	d be lied for each post in music
			It completed wells.	