## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

|                  |     | T  |  |
|------------------|-----|----|--|
| DISTRIBUTION     |     |    | T  |
| SANTA FE         |     | 1- | <del>                                     </del> |
| PILE             |     | 1  | 1  |
| U.B.O.4.         |     | 1  |  |
| LAND OFFICE      |     |    |  |
| TRANSPORTER      | CIL |    |  |
|                  | GAS |    |  |
| OPERATOR         |     |    |  |
| PROBATION OFFICE |     |    |  |

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83

Separate Forms C-104 must be filed for each pool in multiply completed wells.

## REQUEST FOR ALLOWABLE AND

| I. AUTHORIZATION TO TRANS  | SPORT OIL AND NATURAL GAS  |  |  |  |
|--|--|--|--|--|
| Operator   |  |  |  |  |
| Phillips Oil Company   |  |  |  |  |
| Address  |  |  |  |  |
| 4001 Penbrook Street Odessa, Texas   | 79762  |  |  |  |
| Reoson(s) for filing (Check proper box)  | Other (Please explain)   |  |  |  |
| New Well Change in Transporter of:   |  |  |  |  |
| Recompletion Oil D   | Dry Gas  |  |  |  |
| Change in Ownership Casinghead Gas C   | Effective 12-1-83  |  |  |  |
| If change of ownership give name Phillips Petroleum Cor<br>and address of previous owner   | mpany 4001 Penbrook, Odessa Texas 79762  |  |  |  |
| II. DESCRIPTION OF WELL AND LEASE  | ·  |  |  |  |
| Santa Fe Well No. Pool Name, Including F   | ormation Kind of Lease No.   |  |  |  |
| Santa Fe 87 North Vacuu  | m-Abo Stote, Federal or Fee State B-1606   |  |  |  |
| Location   |  |  |  |  |
| Unit Letter L : 2130 Feet From The South Line and 660 Feet From The West   |  |  |  |  |
| Line of Section 31 Township 17 S Range   | 35 E , NMPM, Lea County  |  |  |  |
| III DESIGNATION OF TRANSPORTER OF OU. AND MATTIRAL CAS   |  |  |  |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL   | Address (Give address to which approved copy of this form is to be sent)   |  |  |  |
| Texas New Mexico Pipe Line Company P. O. Box 2528, Hobbs, New Mexico 88240   |  |  |  |  |
| Name of Authorized Transporter of Casinghead Gas \( \) or Dry Gas \( \) Address (Give address to which approved copy of this form is to be sent) |  |  |  |  |
| Phillips Petroleum Company   | 4001 Pembrook, Odessa, Texas 79762   |  |  |  |
| Thu Sec Two Dec Languages  |  |  |  |  |
| give location of tanks.  | Yes  |  |  |  |
| If this production is commingled with that from any other lease or pool, give commingling order number:  DHC-310                                 |  |  |  |  |
|  | Five committed and the unimper. DMC-210  |  |  |  |
| NOTE: Complete Parts IV and V on reverse side if necessary.  |  |  |  |  |
| VI. CERTIFICATE OF COMPLIANCE  | OIL CONSERVATION DIVISION  |  |  |  |
| VI. CERTIFICATE OF COMPLIANCE  |  |  |  |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED JUN 18 1984                                       |  |  |  |  |
| been complied with and that the information given is true and complete to the best of my knowledge and belief.                                   | The second secon |  |  |  |
| my knowledge zhu benet.  | BY ORIGINAL SIGNED BY JERRY SEXTON   |  |  |  |
|  | TITLE DISTRICT I SUPERVISOR  |  |  |  |
| 0000   |  |  |  |  |
| J. B. Rush  This form is to be filed in compliance with RULE 1   |  |  |  |  |
| (Signature)  | If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation   |  |  |  |
| Production Records Supervisor  | tests taken on the well in accordance with nul 111.  |  |  |  |
| (Title) All sections of this form must be filled out completely  |  |  |  |  |
| Fill out only Sections 1. II. III. and VI for changes  |  |  |  |  |
|  | well name or number, or transporter, or other such change of condition.  |  |  |  |

JUN 15 1984
HORES COMMENTERS

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