Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 85240

State of New Mexico). ...rgy, Minerals and Natural Resources Departme.

OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Astenia, NM \$8210

Santa Fe, New Mexico 87504-2088

L	T	<u>O TRA</u>	NSP	ORT OIL	AND NA	TURAL GA	\ \	DI No			
Operator Dhilling Potroloum Company						Well API No. 30-025-20290					
Phillips Petroleum Company Address							1 30-	025-202	30		
4001 Penbrook Street,	Odessa	, Texa	s	79762							
Reason(s) for Filing (Check proper box)					X Oth	x (Piease explo	zin)				
New Well	(Change in	Transp	orter of:	` Ch	ange in	Lease N	ame & We	ell Numb	er from	
Recompletion	Oil	ᆜ	Dry G	as 📙	St	ate "A"	Well No	. 6			
Change in Operator	Casinghead	Gas 🗌	Conde	mente	Ef	fective	12-1-93				
if change of operator give name Shell	.l Weste	rn E&	P, I	nc., Bo	x 576, E	louston,	Texas 7	7001			
ma address of brevious operator											
IL DESCRIPTION OF WELL A		SE	In	7			Wind.	flama Ch	2+b I	nase No.	
Vacuum Glorieta East	Unit 3 Pool Name, Including Unit 3							fLease State Lease No. BANKAKAKAKAK B-2354-2			
Location	01111	-	, va	Cuuli Gi	or reca	· · · · · ·			<u>l</u>		
	. 2310	1	F: 4 F	No	orth :-	and1980	n 12.	et From The .	Fact	Line	
Unit LetterG	: 2310		. Peet r	TOE IDE 110		E 880	<u></u>	et Pionii The .	LIGISI.		
Section 31 Township	17-S		Range	35-E	, N	MPM,	Lea	L		County	
III. DESIGNATION OF TRAN	SPORTER	OF O	LAN	UTAN DI	RAL GAS						
Name of Authorized Transporter of Oil	X (or Conden	sate		1	e address to wi	• • •				
Texas-New Mexico Pipe		P. O. Box 42130, Houston, Texas 77242									
Name of Authorized Transporter of Casinghead Gas X or Dry Gas						Address (Give address to which approved copy of this form is to be sent)					
GPM Gas Corporation					4044 Penbrook Street, Odessa, Texas 79762						
If well produces oil or liquids, give location of tanks.			Twp.	Rge.	is gas actuall	y connected?	When	7			
		31	17		<u>Yes</u>		LNR_				
If this production is commingled with that I IV. COMPLETION DATA	rom any othe	r lease or	poor, g	ive commingi	ing order num	DET:					
IV. COMEETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	, o I	i			 				l	
Date Spudded	Date Compl	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			Tubing Depth		
					L			Depth Casing Shoe			
Perforations								Depth Casi	ng 2006		
		IDDIC		DIC AND	CE) CENTE	NC BECOR	<u> </u>	<u> </u>			
	TUBING, CASING AND								SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	 										
	-	····									
			-		 						
V. TEST DATA AND REQUES	T FOR A	LLOW	ABLE	<u> </u>	<u></u>						
OIL WELL (Test must be after n	ecovery of total	al volume	of load	i oil and must	be equal to or	exceed top all	owable for thi	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test					ethod (Flow, pr					
Length of Test Tubing Pressure					Casing Press	ште		Choke Size			
							Gas- MCF				
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			GE- MCF			
]							1	 		
GAS WELL											
Actual Prod. Test - MCF/D	Length of T	est			Bbis. Conde	mie/MMCF		Gravity of	Condensate	- · ·	
					Cosing Process (Short in)			Chales Circ	Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			CHOKE SIZE	Carolin Silv		
	<u></u>				 		·· ·· · · · · · · · · · · · · · · · ·	1			
VL OPERATOR CERTIFIC	ATE OF	COMP	PLIA	NCE	11 .	OIL CON	JOERY	ATION	DIVISIO	N	
I hereby certify that the rules and regul					1		IOL: IV	AIIOII	DIVIOR	514	
Division have been complied with and is true and complete to the best of my l			€E #00 ′	ve			י מבע	4 / 400	12		
and the state of t	11		_		Date	Approve	ed Liel	1 4 199	<u>. </u>		
1 (b + W look)											
Bighant					By_	By ORIGINAL SIGNED BY JERRY SEXTON					
. M. Sanders - Supervisor Regulatory Affairs							DISTR	CT I SUPE	RVISOR		
Printed Name			Title		Title	!					
/ 11-23-93	(915)									
Date		Tek	ephone	NO.	H						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.