District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719 District III

1000 Rio Brazos Rd., Aztec, NM 87410 District IV

State of New Mexico
Minerals & Natural Resources Department Ene.

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, NM 87504-2088

O Box 2088, Santa	ı Fe, NM	87504-2088								Ш	AMEN	NDED REPOR	
Ι.		REQUES	ST FOR A	LLOWA'	BLE	AND A	UTHO	RIZAT	TON TO TR	<b>LANS</b> I	PORT		
		10	perator name an	nd Address					2 (	OGRID N	lumber		
Phillips P	etrol	eum Comp	any				/ <b>/ ^</b>				017643		
4001 Penbr			H <sup>3</sup> Res				ason for l	son for Filing Code G 9/1/1994					
Odessa, TX	XPI Number					S Dool No	5 Pool Name				<u> 7/1</u>	//1994	
		·					<sup>6</sup> Pool Code						
	25-20			VACUUM GLORIETA						62160 9 Well Number			
-	perty Cod 13119	e		VACIDIM (		Property Name ETA EAST UNIT TRACT 2			ידי		9 We		
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UL or lot no.	Section						North/S	South Line	Feet from the	T East/W	Vest line	County	
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UL or lot no.	Section					t from the	North/S	South Line	Feet from the	East/V	West line	County	
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12 Lse Code	13 Produ	lucing Method (		Connection Date	ie 15	<sup>15</sup> C-129 Pen	mit Numb	er le	<sup>6</sup> C-129 Effective	Date	<sup>17</sup> C-12	29 Expiration Date	
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III. Oil and	d Gas	_	rters Transporter Nam		<del></del>	20 POD		T 31 O/G	77 PO	<del>~ ; ; ; ; ;</del>	- Toronto	<del>.</del>	
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V. Well C	omple	tion Data	a 26 Ready Date			<sup>27</sup> TD	<del></del>		<sup>28</sup> PBTD		29 Pe	rforations	
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30 H	Iole Sie		31 Casir	ng & Tubing Siz	ze	32 Depth Set		Depth Set		3	<sup>33</sup> Sacks Ce	ement	
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			+	<del></del>									
VI. Well T	Foet D							<del></del>			<del></del>		
34 Date New			elivery Date 36 Test Date			37	Test Leng	gth	38 Tbg. Pressur	re	39 (	Csg. Pressure	
ĺ	1	1									1	-	
40 Choke Size	ze	41 O	)il	<sup>42</sup> Water	r		<sup>43</sup> Gas		<sup>44</sup> AOF		45 7	Test Method	
l	!	1		1							i		
46 I hereby certif								OIL CC	NSERVATIO	N DIV	TEION		
complied with an the best of my kn			iven above is to	ue and complete	e to	A meroved				N Dr.	ioio.		
Signature:	1_12	Olic	nle			Арргочо	ORIC	S LANIE	IGNED BY				
Printed name:	רו <u>ר</u>					Title: GARY WINK FIELD REP. II							
Title:	·					Approval Date:							
COORDINATO		NANCE & (				FEB 1 7 1995							
Date: 2/08/9				15-368-16									
47 If this is a ch	nange of c	perator fill in	the OGRID nur	nber and name	of the p	revious oper	ator						
		Previous Opera	ator Signature			Pri	nted Name	e		Titl	le	Date	
Trevious Operator Signature						Timed Name Time Da							