	DISTRIBUTION		-	
	SANTA FE FILE		CONSERVATION COMMISSI T FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and (.+1
	U.S.G.S. AUTHORIZATION TO TRA		AND RANSPORT OIL AND NATURAL	Effective 1-1-65
	IRANSPORTER OIL			
	GAS OPERATOR			
	PROPATION OFFICE			
•	PHILLIPS PETROLEUM COMPANY			
	4001 Penbrook Street, Odessa, Texas 79762			
	Reason(s) for filing (Check proper box) New Welt Change in Transporter of: Other (Please explain) Order No. 5871 Change			
	Recompletion	completion Cil Cil Dry Gas Of lease name bi		ecause of Unitization.
	Change in Ownership X		Formerly: Shell	- State-V #6
	If change of ownership give name and address of previous owner	Shell Oil Company, P. O	. Box 1509, Midland, Texa	as 79702
II.	DESCRIPTION OF WELL AND	LEASE		
	Lease Name East Vacuum GE Unit Tract No. 2717	B-SA Well No. Pool Hame, Including 006 Vacuum GB-S		
	Location P 9	90 Feet From The South Li		<u>B-1404</u>
	-			The East
117			<u>35-Е , ммрм, Lea</u>	2 County
	Name of Authorized Transporter of O		AS Address (Give address to which appro	ved copy of this form is to be sent)
	Texas-New Mexico Pipe Name of Authorized Transporter of Co	Line	P.O. Box 2528, Hobbs, Address (Give address to which appro	N.M. 88240
	Phillips Petroleum Co	mpany	4001 Penbrook St., Od	
	If well produces ail or liquids, give location of tanks.	Unit Sec. Twp. Pge. P 27 17-S 35-I	Is gas actually connected? Wh	
IV.	If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,		
	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Hes'v. Dill. 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	Tubing Depth
	Perforations			Tubing Depin
	Depth Casing Shoe			Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, ANI CASING & TUBING SIZE	D CEMENTING RECORD	
			DEFINSEI	SACKS CEMENT
		•		
. [}
	UII, WEIL able for this dept		fter recovery of total volume of load oil a epth or be for full 24 hours) Producing Method (Flow, pump, gas lif	and must be equal to or exceed top allow-
ł	Length of Test	Tuble Danse		
		Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Cil-Bbis.	Water-Bbls.	Gas • MCF
•			<u>1</u>	L
ſ	GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
┝	Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	CERTIFICATE OF COMPLIANCE			
	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 DEC 28 1970 APPROVED Orig. Signed by BY Jerry Sexton TITLE Dist 1, Suga	
C				
•				
-	501		TITLE	
	Gelli dec		If this is a request for allowable 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 MULE 111. All sections of this form must be filled out completely for sllow- while on new and recompleted wells.	
	(Signature) PRODUCTION CLERICAL SUPERVISOR			
	(Title)			
	/ Z - [-] O (Dai	•)	Fill out only Sections I, 11, 11, and VI for changes of owner, well name or number, or transporter, or other such change of condition	
			1 -	be filed for each pool in multiply