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Appropriate District Office
D.STRICT I
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico ..ergy, Minerals and Natural Resources Departn

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator								Well API No.				
Phillips Petroleum Company								30-025-20846				
Address												
4001 Penbrook Street,	Odessa	a, Texa	as	79762								
Reason(s) for Filing (Check proper box)					X Ou	et (Please expl	ain)					
New Well	Change in Transporter of:				Change in Lease Name & Well Number from							
Recompletion	Oil 🖳 Dry Gas 🖳					State B-1576, Well No. 7						
Change in Operator	Casinghe	ad Gas 🗌	Con	densate		fective						
If change of operator give name and address of previous operator Arc	co Oil	& Gas	Com	oany, Bo		Midland,						
IL DESCRIPTION OF WELL AND LEASE												
Lease Name Tract 19	Well No.   Pool Name, Include			ling Formation			Kind of Lease State		ease No.			
Vacuum Glorieta East	Unit   1   Vacuum (		acuum G	lorieta			State, Peters 5 5 6 - 3		76-3			
Location												
Unit LetterL	_ ;_2310	)	Feet	From The	South Lin	e and660	)1	Feet From The	West	Line		
		_										
Section 32 Township	<u>р 17-5</u>	5	Rang	<b>≈</b> 35–E	,N	MPM, I	ea			County		
III. 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 Pipeline Company					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 P	enbrook	Street,	Odessa, Texas 79762				
If well produces oil or liquids,	Unit	Sec.	Twp		Rge. Is gas actually connected?			When ?				
give location of tanks.	I A	31	17	S   35E	Ves			8-31-6/	L			
If this production is commingled with that i	from any oth	ner lease or	pool,	give comming	ling order numi	ber:	<del></del>					
IV. COMPLETION DATA												
Designate Type of Completion	. (30)	Oil Well	<u> </u>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
					Total Depth	<u> </u>	L	1	<u> </u>	<u> </u>		
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	Top Oil/Gas Pay			Tubing Depth			
·												
Perforations								Depth Casir	ng Shoe	<del></del> -		
TUBING, CASING AND CEMENTING RECORD												
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUES												
OIL WELL (Test must be after re			of load	d oil and must	<del>,</del>				for full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of Te	SI.			Producing Me	sthod (Flow, pu	mp, gas lift,	elc.)				
Length of Test	T-1:- P-	Data Danama				Casing Pressure			<del></del>			
Lengar or rest	I uping rre	lubing Pressure				Caking Flessure			Choke Size			
Actual Prod. During Test				Water - Bbis.			Gas- MCF					
Actual Float During Test	Oil - Bbls.				Water - Doile							
	1				<u> </u>			<u> </u>				
GAS WELL												
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of C	Gravity of Condensate			
Testing Method (pitot, back pr.)  Tubing Pressure			ture (Shut-in)			Casing Pressure (Shut-in)						
									Choke Size			
	<u> </u>				\			J				
VI. OPERATOR CERTIFICATE OF COMPLIANCE					-		CEDV	ATIONI		<b>N</b> 1		
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					0 E (* + 2 % 8 8 9 )							
is and complete to the cost of the showbether and belief.						Date Approved DEC 13 DEC						
1 that I last												
Signature L. M. Sanders - Supervisor Regulatory Affairs					∥ Bv <sup>(</sup>	By DISTRICT I SUPERVISOR						
					-, -							
Printed Name Title					Title				,			
11-22-93 (915) 368-1488												
Date	<del></del>	Tele	phone	No.	11							

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.