Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Largy, Minerals and Natural Resources Departm.

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

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator					Well	API NO.			
Phillips Petroleum Co	ompany				30-0	25-20847			
Address									
4001 Penbrook Street,	Odessa, Tex	as 79762	- Oth	(D)					
Reason(s) for Filing (Check proper box) New Well	Chance is	Transporter of:		et (Piease expl				_	
Recompletion	Oil Change it	Dry Gas		ange in ate B-15		ame & Well	Numb	er from	
Change in Operator	Casinghead Gas	12-1-93							
If change of operator give name		Pov 161							
	o Oil & Gas C	O., BOX 161	.U, MIGLE	ing, Texa	s /9/0	1			
II. DESCRIPTION OF WELL		T=				e esta			
Lease Name Tract 19							r Lease State Lease No. RECONNECTE B-1576-3		
Vacuum Glorieta East	Unit 3	Unit 3 Vacuum Glorieta			,	Б-1376-3			
Location M	. 660	Feet From The	South	- 500		TAI	est		
Unit Letter	_ :	Feet From The	Line Line	200	I*e	et From The	COL	Line	
Section 32 Townshi	p 17 - S	Range 35-E	, N	MPM,	Lea			County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	C d			e address to wi	hich approved	copy of this form	ie to he ee	m ()	
Texas-New Mexico Pipe	LXJ				• •	• • • •			
Name of Authorized Transporter of Casing		or Dry Gas				ton, Texas			
GPM Gas Corporation			1		= =	Odessa. T		•	
If well produces oil or liquids,	Unit Sec.	Twp. Rge.				en ?			
give location of tanks.	A 31 17S 35E Yes				<u> </u>	-17-64			
If this production is commingled with that: IV. COMPLETION DATA	from any other lease or	pool, give commingl	ing order numi)					
	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back San	ne Res'v	Diff Res'v	
Designate Type of Completion	Date Compl. Ready to	. Parad	Total Depth		<u></u>			<u> </u>	
Date Spudded	Date Compi. Ready to	PIOL	Total Depth			P.B.T.D.			
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations							Depth Casing Shoe		
	TUBING,	CASING AND	CEMENTI	NG RECOR	D				
HOLE SIZE	CASING & TI	JBING SIZE		DEPTH SET		SAC	KS CEM	ENT	
V. TEST DATA AND REQUES	T FOR ALLOW	ABLE	•						
	ecovery of total volume	of load oil and must	 	 			ili 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test		Producing Mo	thod (Flow, pu	ımp, gas iyi, e	ic.)			
Length of Test	Tubing Pressure		Casing Pressure			Choke Size			
mander or san	I would a teasting								
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas- MCF			
			<u></u>						
GAS WELL						<u>.</u>			
Actual Prod. Test - MCF/D	Length of Test		Bbis. Condensate/MMCF			Gravity of Condensate			
Production Mark and A from the Act of the	Tubing Pressure (Shut-in)		Casing Desember (Chief in)			Choke Size			
Testing Method (pitot, back pr.)	Trong Pressure (200	Casing Pressure (Shut-in)			CHORE SIZE				
VI. OPERATOR CERTIFIC	ATE OF COMP	LIANCE	1			·			
I hereby certify that the rules and regula	ations of the Oil Conser	vation		JIL CON	ISERV	ATION DI	VISIC	N	
Division have been complied with and		en above							
is true and complete to the best of my l	knowledge and belief.		Date	Approve	ط الله	3 1993			
1. In N	Varley			OHO	INA: con	165 DV 1555	**		
Signature	10-		By_		- DISTON	IED BY JERRY I i supervis c	SEXTO	N	
	visor Regulat		1			· · satestálýf	ra,		
Printed Name	10351	Title	Title	••••••••••••••••••••••••••••••••••••••			بميو	, . 	
11-22-93 Date		668-1488 phone No.							
	1000	r	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.