3 <b>B.</b>	DISTRIBUTION DISTRIBUTION SANTA FE FILE U.S.G.S. LAND DFFICE IRANSPORTER OPERATION OFFICE Operator PHILLIPS PETROLEU Address 4001 Penbrook Str	REQUEST	TONSERVATION COMMIS: FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-11 Ellective 1-1-65 GAS	
	Resson(s) for filing (Check proper box)         New We!!       Change in Transporter of:         Recompletion       Cii         Change in Ownership X       Casinghead Gas         Condensate       Other (Please explain)         Order No. 5871       Change         of lease name because of Unitization.         Formerly:       Chevron USA Inc., P. O. Box 1660, Midland, Texas 79702				
11.	DESCRIPTION OF WELL AND	LEASE			
	Lease Name East Vacuum GB- Unit Tract No. 3440				
	Location Unit Letter N : 940 Feet From The South Line and 1650 Feet From The West				
Line of Section 34 Township 17-S Bange 35-E , NMPM, Lea County					
	Name of Authorized Transporter of Oll Texas-New Mexico Pipe	X or Condensate	Address (Give address to which appro		
	Name of Authorized Transporter of Cas	singh <del>a</del> ad Gas 🔀 or Dry Gas 🚞	P.O. Box 2528, Hobbs Address (Give address to which appro	, N.M. 88240 oved copy of this form is to be sent)	
•••	Phillips Petroleum Com	Ipany Unit Sec. Twp. Ege.	4001 Penbrook St., Oc	dessa, Texas 79762	
	If well produces oil or liquids, give location of tanks.	K 27 175 35E	Yes	12-1-78	
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order number:		
	Designate Type of Completio	on - (X)	New Well Workover Deepen	Plug Back Same Res'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	<u> </u>	1	Depth Casing Shoe	
		TUBING, CASING, AND CEMENTING RECORD			
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	· · · · · · · · · · · · · · · · · · ·				
	<u></u>	•			
	TEST DATA AND REQUEST FO		; fter recovery of total volume of load oil pth or be for full 24 hours;	l and must be equal to or exceed top allow-	
Í	OIL, WELL able for this de Date First New Oil Run To Tanks Date of Test		Producing Mothod (Flow, pump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
ļ	Actual Prod. During Test	Oll-Bbis.	Water - Bbis.	Gae - MCF	
	GAS WELL	AS WELL			
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
ł	Testing Method (pitor, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
ך 1. וי	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 APPROVED DEC 28 1978 Orig. Signed by . 19		
1					
(			BY Jerry Sexton		
	_ /		TITLE Dist 1, Supv.		
-	PRODUCTION CLERICAL SUPERVISOR		This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for sllow.		
•	(Dat	<u>Ś</u> •/	while on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiply condition.		