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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Phillips Petroleum Company

Address
Room B-2, Phillips Building, Odessa, Texas 79760

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of: ---

Recompletion ☒ Oil ☐ Dry Gas ☐ ---

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ ---

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name **Lea** Well No. **23** Pool Name, Including Formation **R-4041 Vacuum (Wolfcamp) - Ext.** Kind of Lease **State, ~~Leasehold~~** Lease No. **B 4118**

Location

Unit Letter **P** **510** Feet From The **South** Line and **810** Feet From The **East**

Line of Section **30** Township **17-S** Range **34-E** , NMPM, **Lea** 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 Pipe Line Company **Box 1510, Midland, Texas 79701**

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company **Room B-2, Phillips Bldg., Odessa, Texas 79760**

If well produces oil or liquids, give location of tanks. Unit **P** Sec. **29** Twp. **17-S** Rge. **34-E** Is gas actually connected? **Yes** When **8-6-70**

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-363**

IV. COMPLETION DATA

Designate Type of Completion -- (X) Oil Well ☒ Gas Well New Well Workover Deepen Plug Back ☒ Same Rest'v. Diff. Rest'v. ☒

Date Spudded **PP-8-5-70 Drill-4-3-68** Date Comp. Ready to Prod. **PP-8-21-70 Drill-6-13-68** Total Depth **13,623** P.B.T.D. **10,460**

Elevations (DF, RKB, RT, GR, etc.) **4103' RKB** Name of Producing Formation **Wolfcamp** Top Oil/Gas Pay **10,290** Tubing Depth **10,330**

Perforations **10,290-10,310'** Depth Casing Shoe **13,623**

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	382'	425ex Class H w/2% CaCl2.Circ75ex
11"	8-5/8"	5378'	450ex Trinity LW w/20%DD+450exClassH.TOC at 2200'.
7-7/8"	5-1/2"	13,623'	400ex Trinity LW & 200ex neat.TOC9850'

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks **8-21-70** Date of Test **8-26-70** Producing Method (Flow, pump, gas lift, etc.) **Swabbing**

Length of Test **10 hours** Tubing Pressure Casing Pressure Choke Size

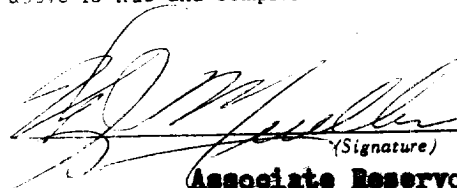
Actual Prod. During Test Oil - Bbls. **50** Water - Bbls. **5** Gas - MCF **78**

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
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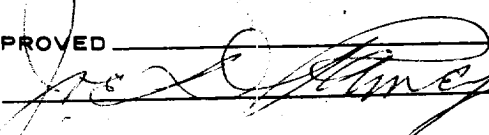
CERTIFICATE OF COMPLIANCE

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.

 **W.J. Mueller**
(Signature)
Associate Reservoir Engineer
(Title)
8-28-70
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY  _____

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable 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 allowable 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 completed wells.

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OIL CONSERVATION COMM.
HOTEL N. 1