

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
SANTA FE		REQUEST FOR ALLOWABLE			
FILE		AND			
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
TRANSPORTER	OIL				
	GAS				
OPERATOR					
PRORATION OFFICE					
Operator Phillips Petroleum Company					
Address Room 711, Phillips Building, Odessa, Texas 79760					
Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> temporarily abandoned <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>				Activate well previously, Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Other (Please explain)					

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE				
Lease Name Lea	Well No. 24	Pool Name, Including Formation Vacuum, North Abo	Kind of Lease State, Federal or Fee	Lease No. B 4118
Location Unit Letter 'P' : 660 Feet From The south Line and 660 Feet From The east				
Line of Section 21 Township 17-S Range 34-E, NMPM, County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Pipe Line Corporation—Trucks		Address (Give address to which approved copy of this form is to be sent) Box 900, Dallas, Texas 75221				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be sent) Room 711, Phillips Bldg., Odessa, Tex., 79760				
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 21	Twp. 17-S	Rge. 34-E	Is gas actually connected? Yes	When 11-1-74

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)					Activate				
Date Spudded 1-14-72	Date Compl. Ready to Prod. Activated (11-1-74)	Total Depth 9000'		P.B.T.D. 8945'					
Elevations (DF, RKB, RT, GR, etc.) 4038.6' Gr.	Name of Producing Formation Abo	Top Oil/Gas Pay 8270'		Tubing Depth 8895'					
Perforations Selectively 2 holes/ft. from 8807-8857'		Depth Casing Shoe 8996'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET				SACKS CEMENT			
12-1/4"	8-5/8"	1606' (300 sx Incor SR 20% DD & 250 sx (Incor							
		SR 2% CaClp. Circ 50 sx.							
7-7/8"	5-1/2"	8996' (1800 sx Tr. LW, 250 sx Class H. (TOC at							
		3550')							

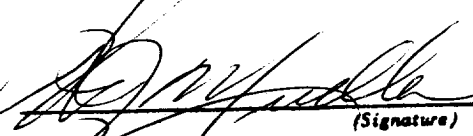
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-2-74	Date of Test 11-7-74	Producing Method (Flow, pump, gas lift, etc.) Insert pump= 2"x1-1/4" x 20'	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble. 24	Water-Bble. 11	Gas-MCF 18

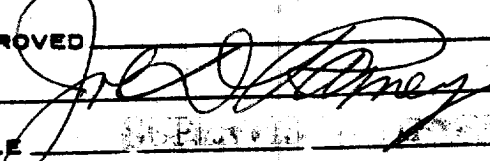
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VII. 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)
Senior Reservoir Engineer
(Title)
11-18-74
(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.

RECEIVED

NOV 21 1974

OIL CONSERVATION COMM.
DOES, N. M.