

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

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator  
**Phillips Petroleum Company**

Address  
**Room 711, Phillips Building, Odessa, Texas 79761**

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

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner: **THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Santa Fe</b>	Well No. <b>124</b>	Pool Name, Including Formation <b>Vacuum North Abo N-4423</b>	Kind of Lease State, <del>XXXXXX</del> <b>TX</b>	Lease No. <b>B-1501</b>
Location				
Unit Letter	<b>D</b>	Feet From The	<b>north</b>	Line and
	<b>520</b>			<b>520</b>
		Feet From The	<b>west</b>	
Line of Section	<b>29</b>	Township	<b>17-S</b>	Range
			<b>35-E</b>	, NMPM, <b>Lea</b> County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Phillips Petroleum Company--Trucks</b>	Address (Give address to which approved copy of this form is to be sent) <b>Rm. 711, Phillips Bldg., Odessa, Texas</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Phillips Petroleum Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Rm. 711, Phillips Bldg., Odessa, Texas 79761</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>D</b>	Sec. <b>29</b>
	Twp. <b>17-S</b>	Rge. <b>35-E</b>
	Is gas actually connected? <b>Yes</b>	When <b>7-1-72</b>

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen.	Plug Back	Same Res'tv.	Diff. Res'tv.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded <b>5-15-72</b>	Date Compl. Ready to Prod. <b>6-26-72</b>		Total Depth <b>8982</b>		P.B.T.D. <b>8937</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>3987' RKB, 3976' Gr.</b>	Name of Producing Formation <b>Abo</b>		Top Oil/Gas Pay <b>8192</b>		Tubing Depth <b>8630</b>			
Perforations <b>8658-61', 8666-69', 8675-78', 8688-94', 8726-29'</b>					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>12-1/4"</b>	<b>8-5/8"</b>		<b>1688'</b>		<b>600 sx Incor SR, Circ.</b>			
<b>7-7/8"</b>	<b>5-1/2"</b>		<b>8982'</b>		<b>(1800 sx Tr. LW, 250 sx Class H neat)</b>			
	<b>2-3/8"</b>		<b>8630</b>					

V. 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)

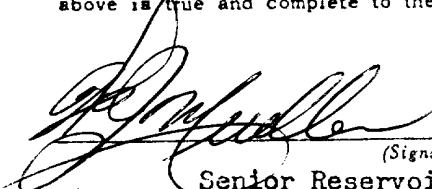
Date First New Oil Run To Tanks <b>6-28-72</b>	Date of Test <b>7-18-72</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>24 Hrs.</b>	Tubing Pressure <b>--</b>	Casing Pressure <b>--</b>	Choke Size <b>--</b>
Actual Prod. During Test	Oil-Bbls. <b>38</b>	Water-Bbls. <b>9</b>	Gas-MCF <b>12.2</b>

GAS WELL

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

VI. 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)

**July 19, 1972**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 27 1972**, 19

BY **John Runyan**  
Geologist  
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.

