

SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

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

Operator Phillips Petroleum Company	
Address Room 711, Phillips Building, Odessa, Texas 79761	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <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 Santa Fe	Well No. 126	Pool Name, Including Formation Vacuum Grayburg/San Andres	Kind of Lease State, Federal or Fee	Lease No. B-2131
Location				
Unit Letter <u>M</u> : <u>330</u> Feet From The <u>west</u> Line and <u>990</u> Feet From The <u>south</u>				
Line of Section <u>26</u> Township <u>17-S</u> Range <u>35-E</u> , NMPM, <u>Lea</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas New Mexico Pipe Line Company	Box 1519, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	Room 711, Phillips Bldg., Odessa, Texas 79761					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	26	17	35	Yes	1-24-74

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Resv. <input type="checkbox"/>	Diff. Resv. <input type="checkbox"/>
Date Spudded 1-4-74	Date Compl. Ready to Prod. 1-21-74		Total Depth 4700'		P.B.T.D. 4600'			
Elevations (DF, RKB, RT, GR, etc.) 3923' DF, 3913' Gr.	Name of Producing Formation Grayburg/San Andres		Top Oil/Gas Pay 4097'		Tubing Depth 4439'			
Perforations 4440-60'					Depth Casing Shoe 4700'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	436' (375 sx ClassH w/2%CaCl2 & 1#Flocele/sx.) - (Circ 35 sx.)	
7-7/8"	5-1/2"	4700' (150sx ClassH w/40%DD, 150sx ClassH w/2#	
	2-3/8" tbg @ 4439'	(Gilsonite/sx. Temp survey TOC at 2850'.)	

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 1-24-74	Date of Test 2-3-74	Producing Method (Flow, pump, gas lift, etc.) Insert pump, 2" x 1-1/16" x 12'	
Length of Test 24 hrs.	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 48	Water - Bbls. 6	Gas - MCF 23

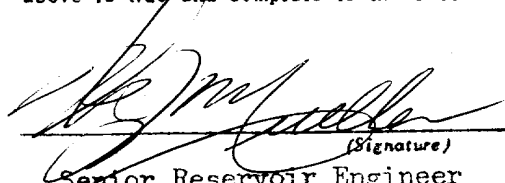
Note: This well in same unit as Well #23 which currently has producing ability of 39 BOPD.

GAS WELL

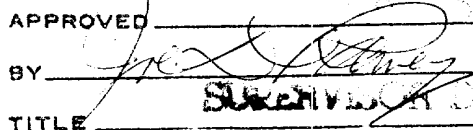
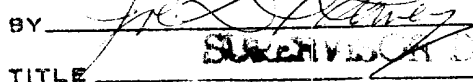
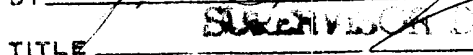
Actual Prod. Test-MCF/D ---	Length of Test ---	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.) ---	Tubing Pressure (shut-in) ---	Casing Pressure (shut-in) ---	Choke Size ---

I. 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)
2-4-74
(Date)

OIL CONSERVATION COMMISSION

APPROVED  FEB 8 1974, 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.

