

NAME OF OPERATOR	
NAME OF FIELD	
DATE	
DEGREE	
LAND OFFICE	
TRANSPORTED	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form O-104
Supersedes Old O-104 and its
Effective 1-1-65

API NO. 30-025-26229

Phillips Petroleum Company

Room 401, 4001 Penbrook Street, Odessa, Texas 79762

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

None

DESIGNATION OF WELL AND LEASE

East Vacuum Grayburg/
San Andres, Tract 3328 Well No. 002 Vacuum Grayburg/San Andres State, Federal or Free State B-1565-2

Unit Letter M : 1310 Feet From The South Line and 1160 Feet From The West

Line of Section 33 Township 17-S Range 35-E, NMPM, Lea County

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 P.O. Box 2528, Hobbs, N.M. 88240

Name of Authorized Transporter of Gaseous Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)

Phillips Petroleum Company 4001 Penbrook Street, Odessa, TX 79762

If well produces oil or liquids, give location of tanks, Unit Sec. Twp. Rge. Is gas actually connected? When
M 33 17-S 35-E Yes 6-26-79

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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Sand Replen. ☐ Other ☐		
Date Spudded 5-18-79	Date Compl. Ready to Prod. 6-18-79	Total Depth 4903'	P.B.T.D. 4836'
Elevations (DE, RKB, RT, GR, etc.) GR 3953 RKB 3946'	Name of Producing Formation Grayburg/San Andres	Top Oil/Gas Pay 4112'	Taking Depth 4493'
Perforations 4447-4588			Depth Casing Shoe 4902'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	362' (cmt w/675 sxs Cl H w/2% CaCl ₂ & 1/2#/sx flocele in 1st 150 sxs.)	
8-5/8"	7"	4900' (cmt w/1240 sx TLW w/2#/gal salt 10% DD 1/2#/sx flocele in 1st 145 sxs. circ 114 sx TLW.)	
(sx flocele tail w/270 2-7/8" sx Cl H w/8#/sx salt & 1/2#/sx flocele in 1st 145 sxs. circ 114 sx TLW.)		4493'	

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

Date First New Oil Run To Tanks 6-26-79	Date of Test 7-2-79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Testing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 298	Water - Bbls. 99	Gas - MCF 274

GAS WELL

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

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 Engineering Specialist
(Title)

July 6, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED

JUL 12 1979

BY

SUPERVISOR DISTRICT 1

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 recovery data taken on that well in accordance with RULE 110.

All sections of this form must be filled out completely for all wells on new and completed wells.

Fill out only I, II, III, and VI for change of name of well, name of number, or transporter or other such change of condition.

INCLINATION REPORT

OPERATOR Phillips Petroleum Corporation ADDRESS Room 401, Phillips BLDG, Odessa, Texas 79762
 LEASE NAME EVGSA Unit 3328 WELL NO. 002 FIELD _____
 LOCATION Section 32, T-17S, R-35E, Lea County, New Mexico

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
360	1	6.3000	6.3000
738	1 1/4	8.2404	14.5404
1237	1/2	4.3413	18.8817
1330	1/2	.9831	19.8648
1727	3/4	4.9387	24.8035
1931	3/4	2.6724	27.4759
2431	3/4	6.5500	34.0259
2977	1/2	4.7502	38.7761
3459	3/4	6.3142	45.0903
3957	1	8.7150	53.8053
4337	1 1/2	9.9560	63.7613
4455	2	4.1182	67.8795
4900	2 1/2	19.4020	87.2815

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

CACTUS DRILLING COMPANY

John Ayers

TITLE John Ayers, Office Manager

AFFIDAVIT:

Before me, the undersigned authority, appeared John Ayers
 known to me to be the person whose name is subscribed herebelow, who, on making
 deposition, under oath states that he is acting for and in behalf of the operator
 of the well identified above, and that to the best of his knowledge and belief such
 well was not intentionally deviated from the true vertical whatsoever.

John Ayers

AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 28th day of June, 19 79

MY COMMISSION EXPIRES MARCH 1, 1980

SEAL

Jerry L. Myrick
 Notary Public in and for the County
 of Lea, State of New Mexico

RECEIVED

JUL 11 1979

O.C.D. HOBBS, OFFICE