

NAME OF WELL	
DATE OF COMPLETION	
LOCATION	
LAND OF LEASE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OF WELL	

WELL RECORD INFORMATION REQUIRED FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes O-104 and
Effective 4-1-65

API No. 30-025-26376

Phillips Petroleum Company

Room 401, 4001 Penbrook, Odessa, Texas 79762

(If space for filing of back proper tax)

Other (to leave blank)

New Well	☒	Change in Transporter of:	
Perforation	☐	Oil	☐
Change in Completion	☐	Crude Oil Gas	☐
		Dry Gas	☐
		Condensate	☐

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

DESCRIPTION OF WELL AND LEASE

Lease No.	East Vacuum Gb/ San Andres Unit, Tr. 2622	Well No.	001	Location	Vacuum Gb/San Andres	State	Texas	County	B-149
Direction	East								1460
Feet From The	North								1310
Feet From The	West								
Line of Section	26	Township	17-S	Range	35-E	Lea			

DESCRIPTION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Applicant (If not owner, name of owner)	Address (Give address to which approved copy of this form is to be sent)				
Texas--New Mexico Pipeline	P. O. Box 2528, Hobbs, New Mexico 88240				
Name of Applicant (If not owner, name of owner)	Address (Give address to which approved copy of this form is to be sent)				
Phillips Petroleum Company	Room 401, 4001 Penbrook, Odessa, Texas 79762				
If well produces other fluids, give location of tanks	Is gas actually separated? When				
Unit	Sec.	Top.	Pipe.	Yes	11-1-79
F	26	17S	35E		

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	Recover	Deepen	Plug Back	Shut-In
X	X		X				
Date Completed	Date Completed to Prod.	Total Depth	PERF.				
9-11-79	10-24-79	4800'	4688'				
Elevation (H, A, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Turning Depth				
3911' GR	Grayburg/San Andres	4076'	4658'				
Perforations			Depth Casing Shoe				
4378-4631'			4798'				

TUBING, CASING, AND CEMENTING RECORD			
HOLES SIZE	CASING & TUBING SIZE	DISPERSE	SACKS CEMENT
17-1/2"	13-3/8"	369 (w/675 sxs CIH, w/2% CaCl2, 1/4# sx (celloflakes.	Circ 150 sxs to surface
8-3/4"	7"	(w/1000 sxs TLW, 12# salt, 10% DD, 1/4	
(sx Flocele, 3# sx Gelsonite, Tail in w/400 sxs CIH, 8# salt, 1/4			
2-7/8" 4658'			

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

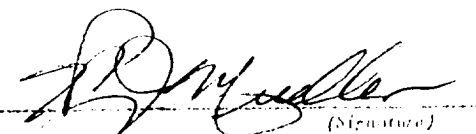
Date First New Oil Put To Tanks	Date of Test	Producing Method (Pump, gas lift, etc.)	
11-3-79	11-12-79	Pump	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
24 hrs.	--	--	--
Actual Prod. During Test	Oil-Prod.	Water-Prod.	GAS-MCF
--	34	27	22

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Lbbls. Condensate-MCF	Gravity of Condensate
Testing Method (Pump, back pt.)	Testing Pressure (Pump-In)	Casing Pressure (Pump-In)	Choke Size

CERTIFICATE OF COMPLIANCE

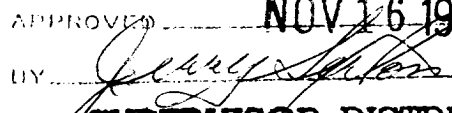
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


W. J. Mueller
Senior Engineering Specialist
(Title)

November 13, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV 16 1979**
BY 
TITLE **SUPERVISOR DISTRICT 1**

This form is to be filed in compliance with RULE 1104.
If this well is subject for allowable for a newly drilled or deepened well, this form must be recomputed by a calculation of the volume taken on the well in accordance with RULE 1104.
All wells as of this form must be filled out completely for allowable on use and recomputed annually.
Fill out only Sections I, II, III, and VI for change of well name or number, or transporter, or other such change of condition.