

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

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

API 30-025-26517

Operator Phillips Petroleum Company		
Address Room 401, 4001 Penbrook, Odessa, Texas, 79762		
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"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

NA

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Vacuum Gb/SA Unit, Tract 2864	Well No. 001	Pool Name, including Formation Vacuum Gb/SA	Kind of Lease State, Federal or Fee	Lease No. R-2498
Location Unit Letter E 1310 Feet From The West Line and 1360 Feet From The North Line of Section 28 Township 17-S Range 35-E, NMPM, Lea 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"/>	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 Authorized Transporter of Casinghead Gas <input checked="" 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	4001 Penbrook Street, Odessa, Texas, 79762	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 29
	Twp. 17-S	Rge. 35-E
	Is gas actually connected? Yes	
	When 1-17-81	

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

IV. 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 Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 11-14-79	Date Compl. Ready to Prod. 10-20-80		Total Depth 4806'		P.B.T.D. 4750'			
Elevations (DF, RKB, RT, GR, etc.) 3973' RKB	Name of Producing Formation Grayburg-San Andres		Top Oil/Gas Pay 4109'		Tubing Depth 4528'			
Perforations 4430-4545'					Depth Casing Shoe 4806'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		351' (w/300 sx Cl H, 2%		CaCl. Circ. 25 sx to sur			
7-7/8"	5-1/2"		4806' (w/1300 sx. TLW, w/12# salt, 10% DD,					
(1/4# Flocele + 3# Gilsonite Tail in w/450 sx Cl H w/8# salt & 2%			4528'		CaCl circ. 224 sx.			
2-7/8					TLW to surface)			

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)

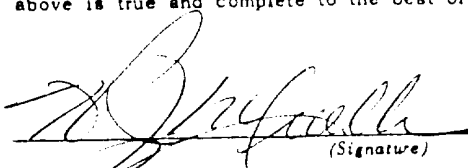
Date First New Oil Run To Tanks 10-22-80	Date of Test 1-17-81	Producing Method (Flow, pump, gas lift, etc.) Insert 2-1/2" x 1-1/2" x 12' pmp. at 4528'	
Length of Test 24 Hrs.	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test ---	Oil - Bbls. 14	Water - Bbls. 18	Gas - MCF 26

GAS WELL

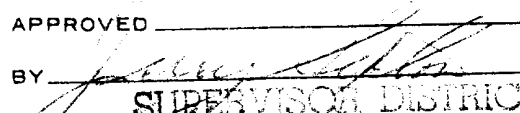
Actual Prod. Test - MCF/D ---	Length of Test ---	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pitot, back pr.) ---	Tubing Pressure (Shut-in) ---	Casing Pressure (Shut-in) ---	Choke Size ---

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 Engineering Specialist  
(Title)  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY   
TITLE SUPERVISOR DISTRICT I

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.

/ehg

