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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 NO. 30-025-26568

Operator Phillips Petroleum Company	
Address Room 401, 4001 Penbrook St., 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Vacuum Gb/SA Unit, Tract 1910	Well No. 003	Pool Name, including Formation Vacuum Gb/SA	Kind of Lease XXXXXXXXXX	Lease No. B-1398
Location				
Unit Letter J	1330	Feet From The East	Line and 2630	Feet From The South
Line of Section 19	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 St., Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 19
	Twp. 17-S	Rge. 35-E
	Is gas actually connected? Yes	
	When 5-3-80	

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-30-80	Date Compl. Ready to Prod. 2-13-80	Total Depth 4900'	P.B.T.D. 4850'					
Elevations (DF, RKB, RT, GR, etc., 3986' GR 3996' RKB	Name of Producing Formation Grayburg/San Andres	Top Oil/Gas Pay 4372'	Tubing Depth 4690'					
Perforations 4632'-4683'	Depth Casing Shoe 4900'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	357' (w/350 sxs Cl H w/15% CaCl + 1/4# Flocele (Circ 80 sxs cmt to surf.))						
7-7/8"	4-1/2"	4900' (w/1200 sxs TLW w/10% DD + 12#/sx salt + (1/4#/sx Flocele + 3#/sx Gilsonite + 400 sxs Cl H w/5#/sx salt. Circ 254 sxs to surf.))						

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

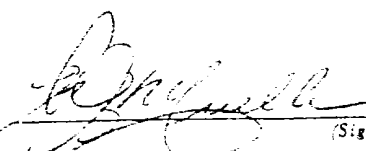
Date First New Oil Run To Tanks 5-3-80	Date of Test 5-7-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 7	Water-Bbls. 1	Gas-MCF 1

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

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)  
May 21, 1980  
(Date)

OIL CONSERVATION COMMISSION

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

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.

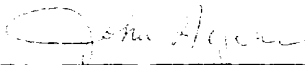
# INCLINATION REPORT

OPERATOR Phillips Pet. Co. ADDRESS Rm 401, Phillips Bldg., Odessa, Texas  
 LEASE NAME EVGSA Unit 1910 WELL NO. 003 FIELD \_\_\_\_\_  
 LOCATION \_\_\_\_\_ Lea County, New Mexico

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
357	1/4	1.5703	1.5708
847	1/4	2.1560	3.7268
1341	1/4	2.1735	5.9004
1831	3/4	6.4190	12.3194
2296	1	8.1375	20.4569
2717	1	7.3675	27.8244
3200	1 1/2	12.6545	40.4790
3716	1 1/2	13.5192	53.9982
4203	1 3/4	14.8535	68.8617
4636	1	7.5775	76.4292
4900	1	4.6200	81.0492

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

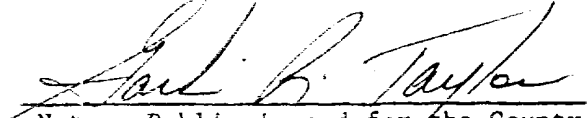
  
 TITLE John Ayers, Office Manager

**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.

  
 AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 23rd day of February, 1980

  
 Notary Public in and for the County  
 of Lea, State of New Mexico

SEAL

MY COMMISSION EXPIRES FEBRUARY 6, 1984