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TRANSPORTER	OIL	
	GAS	
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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. 30-025-26580

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

NA

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Vacuum Gb/SA Unit, Tract 2980	Well No. 002	Pool Name, including Formation Vacuum Gb/SA	Kind of Lease State, KY TX OK	Lease No. E-7585
Location Unit Letter <u>F</u> <u>1330</u> Feet From The <u>West</u> Line and <u>1330</u> Feet From The <u>North</u> Line of Section <u>29</u> Township <u>17-S</u> Range <u>35-E</u> , NMPM, <u>Lea</u> 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) P. O. Box 2528, Hobbs, New Mexico	
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) 4001 Penbrook St., Odessa, TX 79762	
Phillips Petroleum Company		
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 29
	Twp. 17-S	Rge. 35-E
	Is gas actually connected? <u>Yes</u> When <u>11-18-80</u>	

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-29-79	Date Compl. Ready to Prod. 10-14-80	Total Depth 4908'	P.B.T.D. 4850'					
Elevations (DF, RKB, RT, GR, etc.) 3973' GR	Name of Producing Formation Grayburg-San Andres	Top Oil/Gas Pay 4202'	Tubing Depth 4603'					
Perforations 4523-4638'			Depth Casing Shoe 4900'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 353(w/350 sxs Cl "H" w/2% CaCl ₂ & 1/4# Flocele. Circ 80 sxs to surface.				SACKS CEMENT		
7-7/8"	5-1/2"	4900(w/1065 sxs TLW w/12# salt, 10% Diacel D. (1/4# Flocele, 3# Gilsonite, 420 sxs Cl "H" w/5# salt. Circ 55 sxs 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) 4603'

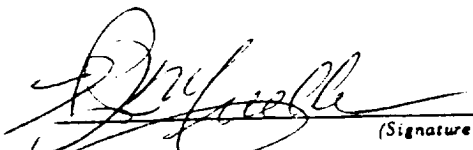
Date First New Oil Run To Tanks 10-16-80	Date of Test 11-18-80	Producing Method (Flow, pump, gas lift, etc.) Insert 2-1/2" x 1-1/4" x 12' pump	
Length of Test 11-18-80	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 54	Water-Bbls. 19	Gas-MCF 21

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.


(Signature)
Sr. Engineering Specialist
(Title)
December 29, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED 4 1981, 19
BY [Signature]
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.

INCLINATION REPORT

API # 30-025-26580

RECORD OF INCLINATION

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