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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. 30-025-26776

I. Operator  
Phillips Petroleum Company  
Address  
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 ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

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 2720	Well No. 007	Pool Name, Including Formation Vacuum Gb/SA	Kind of Lease State, XXXXXXXXX	Lease No. B-1482-3
Location Unit Letter H ; 150 Feet From The east Line and 2450 Feet From The north Line of Section 27 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"/> Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) 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"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook Street, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 26	Twp. 17-S	Rge. 35-E	Is gas actually connected? Yes	When 4-22-81

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 <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 5-29-80	Date Compl. Ready to Prod. 2-9-81		Total Depth 4800'		P.B.T.D. 4740'			
Elevations (DF, RKB, RT, GR, etc., 3923' GL	Name of Producing Formation Grayburg/San Andres		Top Oil/Gas Pay 4040'		Tubing Depth 4585'			
Perforations 4351-4356', 4395-4411', 4453-4466', 4499-4517', 4534-4540' 4379-4383' 4423-4430', 4473-4489', 4523-4526' 88' --88 shots					Depth Casing Shoe 4796'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		355'		400 sxs C1 "H" w/2%			
	(CaCl <sub>2</sub> and 1/4# Flocele. Circ		150 sxs to surface).					
8-3/4"	7"		4786'		1000 sxs TLW, 10% DD, 12#			
(salt, 3# Gilsomite, 1/4# Flocele followed w/400 sxs Class H, 5# salt. Circ 180 sxs.								

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

Date First New Oil Run To Tanks 2-11-81	Date of Test 4-24-81	Producing Method (Flow, pump, gas lift, etc.) Insert pump 2-1/2" x 1-1/2" x 22'	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 18	Water-Bbls. 172	Gas-MCF 9

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)

May 18, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

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 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** 4001 Penbrook, Odessa, Texas 79762  
**LEASE NAME** EVGSAU 2720- **WELL NO.** 007 **FIELD** Vacuum Gb/Sa  
**LOCATION** 2450' FNL, 150' FEL, Section 27; T- 17S, R-35E , Lea Co. N.M.

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
357	3/4	4.6767	4.6767
851	1	8.64.50	13.3217
1353	1 1/4	10.9436	24.2653
1631	1 1/2	7.2836	31.5489
2131	1	8.7500	40.2989
2626	1	8.6625	48.9614
3468	1	14.7350	63.6964
3983	1	9.0125	72.7089
4483	1	8.7500	81.4589
4800	1	5.5475	87.0064

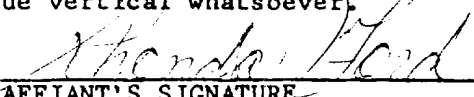
I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

CACTUS DRILLING COMPANY

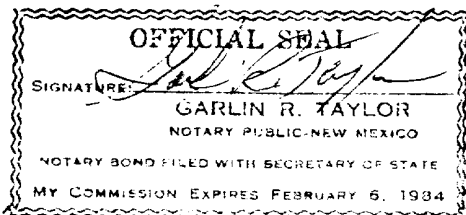
  
TITLE Rhonda Ford, Office Manager

**AFFIDAVIT:**

Before me, the undersigned authority, appeared Rhonda Ford  
 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 19th day of June, 19 80



SEAL

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