

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 NO. 30-025-27275

Operator Phillips Petroleum Co.	
Address 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 Sb/SA Unit Tract 2980	Well No. 004	Pool Name, Including Formation Vacuum Gb/SA	Kind of Lease State, INDIAN RESERVE	Lease No. E-7585
Location Unit Letter <u>F</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>29</u> Township <u>17-S</u> Range <u>35E</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"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, 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 1-24-82

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 2/25/81	Date Compl. Ready to Prod. 11/5/81	Total Depth 4800	P.B.T.D. 4769					
Elevations (DF, RKB, RT, GR, etc.) 3970GR;RKB 3984.3':GI-3	Name of Producing Formation 972' Grayburg/San Andres	Top Oil/Gas Pay Top - 4169': BTM=4800'		Tubing Depth 4629'		Depth Casing Shoe 4800'		
Perforations 4548'-4624'								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	384' (w/400 sxs Cl "C" w/2% CaCl ₂ , 1/4# sx Flocele; circled 50 sxs cmt.)	
7-7/8"	5-1/2"	4800' (w/1050 sxs TLW w/12#/sx slat.	
10% DD, 3# sx Gilsonite, 1/4# sx Flocele, followed by 400 sx Class "C" w/6#/sx salt, circ. 519 sxs cmt.			

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 1-24-82	Date of Test 1-24-82	Producing Method (Flow, pump, gas lift, etc.) 2-1/2" x 1-1/2" x 12' insert pump	
Length of Test 24 hrs.	Tubing Pressure ----	Casing Pressure ----	Choke Size ----
Actual Prod. During Test	Oil-Bbls. 46	Water-Bbls. 8	Gas-MCF 84

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)
Sr. Engineering Specialist
(Title)
April 14, 1982
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 21 1982, 19
BY JEFFREY
TITLE DIRECTOR

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.

RECEIVED
APR 20 1982
HOBBS OFFICE

RECEIVED
APR 20 1982
HOBBS OFFICE