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. 30-025-27331

I.

Operator: Phillips Petroleum Company

Address: 4001 Penbrook, Odessa, Texas 79763

Reason(s) for filing *(Check proper box)*: New Well [X]; Recompletion [ ]; Change in Ownership [ ]; Change in Transporter of: Oil [ ]; Dry Gas [ ]; Casinghead Gas [ ]; Condensate [ ]

Other *(Please explain)*:

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
East Vacuum Gb/SA Unit, Tract 2437	003	Vacuum Gb/SA	State	B-1838-3

Location: Unit Letter 0 ; 1200 Feet From The South Line and 1600 Feet From The East Line of Section 24 Township 17-S Range 34-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: 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 [X] or Dry Gas [ ]: Phillips Petroleum Company GPM Gas Corporation
Address *(Give address to which approved copy of this form is to be sent)*: 4001 Penbrook St., Odessa, Texas 79762

EFFECTIVE: February 1, 1992

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	9	17-S	35-E	Yes	1-20-82

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7-22-81	8-4-82	4800'	4750'
Elevations *(DF, RKB, RT, GR, etc.)*	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3905.8' RKB, 3992' GR 3893.5' GL, 4002' DT	Grayburg San Andres	4510'	4500'
Perforations			**Depth Casing Shoe**
4544-4547', 4556-4583', 4587-4606', 4622-4628'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
8 -5/8"	24#, K-55	381'	400
4 -1/2"	11.6#, N-80	4800'	1200

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*	
1-20-82	1-22-82	Insert pump 2'X1-1/2"X12"	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24	–	–	–
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
	9	85	5

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
--	--	--	36.0
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)

2-1-82
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY Orig. Signed by Jerry Sexton

TITLE Supervisor, Dist. II

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, TX 79762

LEASE NAME East Vacuum Gb/SA Unit Tract 2437 WELL NO. 003 FIELD Vacuum Gb/SA

LOCATION 1200' FSL & 1600; FEL of Sec. 24-17S-R34E

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
381	1/2	3.3147	3.3147
875	1/2	4.2978	7.6125
1373	3/4	6.5238	14.1363
1871	1	8.7150	22.8513
2372	1	8.7675	31.6188
2867	1 1/4	10.7910	42.4098
3523	1 1/4	14.3008	56.7106
3944	1 3/4	12.8405	69.5511
4521	1 3/4	17.5985	87.1496
4800	1 1/2	7.3098	94.4594

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

Denise Leake

TITLE OFFICE MANAGER

AFFIDAVIT:

Before me, the undersigned authority, appeared DENISE LEAKE 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.

Denise Leake

AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 6 day of AUGUST, 19 81

OFFICIAL SEAL

SIGNATURE Garlin R. Taylor

GARLIN R. TAYLOR

NOTARY PUBLIC-NEW MEXICO

NOTARY BOND FILED WITH SECRETARY OF STATE

MY COMMISSION EXPIRES FEBRUARY 6, 1984

SEAL

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