

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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DISTRICT	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-025-27423

Phillips Petroleum Company

Address

Room 401, 4001 Penbrook, Odessa, Texas 79762

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	East Vacuum	Well No.	001	Pool Name, including Formation	Vacuum Gb/SA	Kind of Lease	State, Federal or Fee	State	Lease No.	K-6023-1
Gb/SA Unit, Tract	1982									
Location										
Unit Letter	C			660	Feet From The	north	Line and	1980	Feet From The	west
Line of Section	19	Township	17-S	Range	35-E	NMPM,	Lea		County	

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	Box 2528, Hobbs, NM 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, Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
J 19 17-S 35-E	Yes 8-20-82

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
XX			XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-8-81	7-27-82	4800'	4760'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3988 GR	Grayburg/San Andres	4393'	4647'					
Perforations			Depth Casing Shoe					
4468'-4700'; 4706'-4710'; 4744'-4750'	42 shots		4800'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	352'	400 sxs Class "C"
7-7/8"	5-1/2"	4800'	800 sx TLW, 400 sx
			Class "C"
	2-3/8"	4647'	

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)

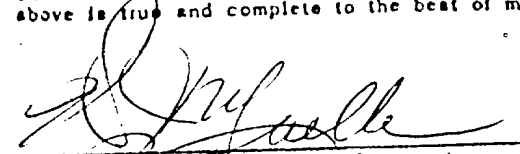
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
8-2-82	8-20-82	Pump
Length of Test	Tubing Pressure	Casing Pressure
24 hrs.	--	--
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
	17.1	42
		Gas-MCF
		10

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
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CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division 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)

August 27, 1982

(Date)

OIL CONSERVATION DIVISION
SEP 7 1982

APPROVED _____, 19__

BY _____ ORIGINAL SIGNED BY

JERRY SEXTON

TITLE _____ DISTRICT 1 SUPR.

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 allow-
able 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 Form C-104 must be filed for each pool in multiple

INCLINATION REPORT

OPERATOR PHILLIPS PET. ADDRESS 4001 PENBROOK, ODESSA, TX 79763
 LEASE NAME East Vacuum Gb/SA Unit Tr. 1982 WELL NO. 001 FIELD Vacuum Gb/SA
 LOCATION (Unit C) 660 FNL, 1980 FWL, Sec. 19, T-17-S, R-35-E, Lea County, NM

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
352	1/4	1.5488	1.5488
846	1/2	4.2978	5.8466
1343	1/2	4.3239	10.1705
1840	3/4	6.5107	16.6812
2368	1	9.2400	25.9212
2869	1	8.7675	34.6887
3376	1 1/4	11.0526	45.7413
3873	1	8.6975	54.4388
4159	1 1/2	7.4932	61.9320
4672	1 1/2	8.4406	70.3726
4800	1 1/2	3.3536	73.7262

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

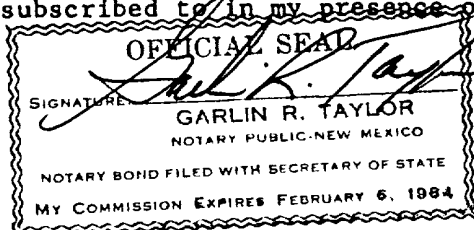
Denise Leake
 TITLE OFFICE MANAGER

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 25 day of SEPTEMBER, 19 81



SEAL

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