

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-025-27985

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
Phillips Petroleum CompanyAddress
Room 401, 4001 Penbrook Street, 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Lea	27	Vacuum (Grayburg/San Andres)	State, Federal or Fee State	B-4118
Location				
Unit Letter	L	1980	Feet From The South	Line and 660
		Feet From The West		
Line of Section	19	Township	17-S	Range 34-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"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company - Trucks	4001 Penbrook St., Odessa, Texas 79762	
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 St., Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	D	30
	17-S	34-E
	Is gas actually connected? When	
	Yes 3-17-83	

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	Some Rest.	Diff. Rest.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
11-28-82	1-31-83	4800'	4678'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4125' DF, 4113' Gr.	Grayburg/San Andres	4191'	4579'					
Perforations 4191'-4197', 4395'-4397', 4431'-4437', 4484'-4489', 4510'-4514', 4520'-4523', 4530'-4534', 4540'-4542', 4554'-4560', 4569'-4572', 4576'-4578'		Depth Casing Shoe						
		--						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8" 24# K-55 ST&C	360'	500 Sxs Class "C"					
7-7/8"	4-1/2" 11.6# N-80 LT&C	4800'	1000 Sxs Lite, 400 Sxs Class "C", 128 Sxs Circ					
7-7/8"	2-3/8" Tubing	4579'	--					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-17-83	3-17-83	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hrs.	--	--	--
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
38 BO	38	4	65

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

I. 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

Senior Engineering Specialist

March 24, 1983

(Date)

OIL CONSERVATION DIVISION

MAR 28 1983

APPROVED

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

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 deviate 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.

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

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