

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

API NO. 30-025-28056

| | |
|------------------------|--|
| CO. 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 ☒
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

DESCRIPTION OF WELL AND LEASE

| | | | | |
|-----------------|----------|---|--------------------------|------------------|
| Lease Name | Well No. | Pool Name, including Formation | Kind of Lease | Lease No. |
| M. E. Hale | 13 | Vacuum Grayburg/San Andres | State, XXXXXX | B-2317 |
| Location | | | | |
| Unit Letter | I | : 1360 Feet From The South Line and 1210 Feet From The East | | |
| Line of Section | 35 | Township 17-S | Range 34-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 Pipe Line Company | Box 2528, Hobbs, New Mexico 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 Street, Odessa, Texas 79762 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| | 0 | 35 | 17-S | 34-E | Yes | 8-7-83 |

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 Rest'. | Diff. Res. |
| | X | | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | | | |
| 3-31-83 | 7-21-83 | 4830' | 4795' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| 4011 GR, 4022 RKB | Grayburg/San Andres | 4049' | 4710' | | | | | |
| Perforations 4367'-4402'; 4470'-4480'; 4538'-4562'; 4564'-4567'; 4576' - 4582' | Total 146'----146 shots | | Depth Casing Shoe | | | | | |
| 4622' - 4690' | | | 4829' | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|-----------------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 14-3/4" | 10-3/4" | 1570' | 1100 sx Class C |
| 9-1/2" | 7" | 4829' | 1290 sx TLW, 500 Cl C |
| | 2-7/8" | 4710' | |

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 all able 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.) | |
| 7-28-83 | 8-7-83 | 2" x 1-3/4" x 25' insert pump | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 | ---- | ---- | ---- |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |
| | 396 | 23 | 525 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| ---- | ---- | ---- | ---- |
| Testing Method (prior, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| ---- | ---- | ---- | ---- |

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.

M. J. Mueller

Senior Engineering Specialist

August 11, 1983

OIL CONSERVATION DIVISION

APPROVED AUG 17 1983, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISORThis form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper 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 all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

RECEIVED
AUG 15 1957
HOBBS OFFICE

RECEIVED
AUG 15 1957
O.C.D.
HOBBS OFFICE

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED