STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION

P O BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

API No. 30-025-30015

Operator
Phillips Petroleum Company

Address
4001 Penbrook St., Odessa, TX 79762

Reason(s) for filing *(Check proper box)*

- [x] 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No
Tract 3202 East Vacuum Gb/SA Unit	018	Vacuum Gb/SA	State	A-1320

Location

Unit Letter H 680 Feet From The East Line and 2560 Feet From The North

Line of Section 32 Township 17-S Range 35-E NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [x] or Condensate [ ]	Address *(Give address to which approved copy of this form is to be sent)*
Texas-New Mexico Pipeline	P. O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas [x] or Dry Gas [ ] EFFECTIVE: February 1, 1992 GPM Gas Corporation	Address *(Give address to which approved copy of this form is to be sent)* 4001 Penbrook St., Odessa, TX 79762

If well produces oil or liquids, give location of tanks	Unit	Sec	Twp	Rge	Is gas actually connected?	When
	I	33	17S	35E	Yes	6/27/88

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

NOTE: *Complete Parts IV and V on reverse side if necessary.*

VI. 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)

Engineering Supervisor, Reservoir
(Title)

July 18, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 28 '88, 19

BY

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 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.

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
5/18/88	6/21/88	4800'	4700'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3945' GR	Grayburg/San Andres	4542'	4288'
Perforations			**Depth Casing Shoe**
4542'-4554'			4800'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	1545'	1000 sk C
7-7/8"	5-1/2"	4800'	900 sk C & 300 sk C Neat
	2-7/8"	4288'	

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.)	
6/21/88	7/2/88	Flowing	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs.	50#	0#	Open
Actual Prod. During Test	**Oil-Bbls**	**Water-Bbls.**	**Gas-MCF**
	133	77	63

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**