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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator Phillips Petroleum Company	Well API No. 30-025-32333
Address 4001 Penbrook Street, Odessa, TX 79762	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) <input type="checkbox"/> Casinghead Gas MUST NOT BE FLARED AFTER <u>4-28-94</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.	

If change of operator give name
and address of previous operator

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe	Well No. 133	Pool Name, Including Formation Vacuum Drinkard	Kind of Lease State, Federal or Rex	Lease No. NM-015221
Location Unit Letter <u>0</u> : <u>435</u> Feet From The <u>South</u> Line and <u>1930</u> Feet From The <u>East</u> Line Section <u>31</u> Township <u>17-S</u> Range <u>35-E</u> , 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"/> Phillips Pet. Company (Trucks)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 791, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4044 Penbrook Street, Odessa, TX 79762					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 31	Twp. 17-S	Rge. 35-E	Is gas actually connected? No	When? WO/Gas Line Connection

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-15-93	Date Compl. Ready to Prod. 2-6-94	Total Depth 8100'	P.B.T.D. 7900'					
Elevations (DF, RKB, RT, GR, etc.) 3968' GL; 3979' RKB	Name of Producing Formation Drinkard	Top Oil/Gas Pay 7540'	Tubing Depth 7398'					
Perforations 7540'-7908'	Depth Casing Shoe 8100'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	1539'	1750 sxs "C"					
11"	8-5/8"	5145'	2400 sxs "C"					
7-7/8"	5-1/2"	8100'	825 sxs "H"					
	2-7/8"	3490'						

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 Tank 2-7-94	Date of Test 2/23/94	Producing Method (Flow, pump, gas lift, etc.) Flowing
Length of Test 24 hrs.	Tubing Pressure 220#	Casing Pressure
Actual Prod. During Test	Oil - Bbls. 330	Water - Bbls. 3.8
		Choke Size 25/64
		Gas - MCF 485.2

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

VI. OPERATOR 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.

L. M. Sanders
Signature
L. M. Sanders, Supervisor, Reg. Affairs
Printed Name
02-22-94
Date
915-368-1488
Telephone No.

OIL CONSERVATION DIVISION

FEB 28 1994

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.