STATE OF NEW MEXICO
GY AND MINERALS DEPARTMENT

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DISTRIBUTION		
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...NSPORTER	OIL	
	GAS	
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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-025-29039

...rator
hillips Petroleum Company

...ress
001 Penbrook Street, Odessa, Texas 79762

...son(s) for filing (Check proper box)

- [X] New Well
- [ ] Recompletion
- [ ] Change in Ownership

Change in Transporter of:

- [ ] Oil
- [ ] Casinghead Gas
- [ ] Dry Gas
- [ ] Condensate

Other (Please explain)
~~CASINGHEAD~~ GAS MUST NOT BE FLARED AFTER 5/1/82 UNLESS AN EXCEPTION TO R-~~4070~~ IS OBTAINED.

...change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Monument	3	Eumont(Yates-7Rivers-Queen)	State, Federal or Fee State	B-10164

Location
Unit Letter F : 1980 Feet From The north Line and 1980 Feet From The west

Line of Section 12 Township 19-S Range 36-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [XX] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co. - Trucks	4001 Penbrook St., Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Not dedicated	

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	12	19S	36E	No	

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 is true and complete to the best of my knowledge and belief.

W. J. Mueller
(Signature)

(Title)

3/21/85
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 27 1985, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I 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 deepene... well, this form must be accompanied by a tabulation of the deviatio... 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 owne... well name or number, or transporter, or other such change of conditio...

Separate Forms C-104 must be filed for each pool in multip... completed wells.

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.
1-03-85	2-13-85	4106'	4045'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3750'DF, 3751'RKB, 3741'	GR Yates-7 rivers-Queen	3907'	3697'

Perforations: Perf'd 4-1/2" csg 3907'-3910'; 3936'-3938'; 3953'-3959'; 3973'-3975'; 3984'-3986' (total 20' - 40 shots)

Depth Casing Shoe: 4105'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8" 24# K-55	307'	300 sx C, 2%CaCl, ¼#/sx cellophane. Circ 75 sx
7 7/8"	4 1/2" 11.6# N-80 (10% DD, ¼#'sx cellophane, 3#/sx gilsonite +	4105'	600 sx TLW w/12#/sx salt, 250 sx C,5#/sx salt.

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.)	
2/20/85	3/17/85	Pumping	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs			
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.**	**Gas - MCF**
	14.5	3	31

GAS WELL

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

RECEIVED
MAR 26 1985
O.C.D.
HOBBS OFFICE