1.	NO. DF COPIES RECEIVED Image: Second Sec			
	Address Post Office Box 10426 Reason(s) for filing (Check proper bax) New Weil Recompletion Change in Ownership If change of ownership give name and address of previous owner	Midland, Texas 79702 Change in Transporter of: Oil Dry Gas Casinghead Gas Condens		
	DESCRIPTION OF WELL AND L Lease Name State A-20 Location Unit LetterJ; 2310	%ell No. Pool Name, Including Fo 2 Eunice Monument	rmailon Kind of Lease L (Grayburg) State, Federal of	eEast
11.	DESIGNATION OF TRANSPORT Narze of Authorized Transporter of Oil Textas New Mexico Pipe Narze of Authorized Transporter of Cast Phillips Patrolaum Co If well produces off or liguids,	IN A bacondensate Tation	37E , NMPM, Lea Address (Give address to which approve P. O. Box 2528 Hobbs, Address (Give address to which approve 10 W.W. Frank Phillips B Is gas actually connected? (When Yes	d copy of this form is to be sent) New Mexico 88240 d copy of this form is to be sent) 1dg, Bartlesville, OK
	give location of tanks. If this production is commingled with <u>COMPLETION DATA</u> Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.)	that from any other lease or pool, f		Plug Back Same Hes'v. Diff. Res'v.
	Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	Depth Casing Shoo SACKS CI:MENT
v.	TEST DATA AND REQUEST FO OIL, WFI L. Dute First New Cil Run To Tanks Length of Test Actual Prod. During Test	DR ALLOWABLE (Test must be aj able for this de Date of Tost Tubing Pressure Oll-Bbls.	(ter recovery of total volume of load oll a pth or be for full 24 hours) Preducing Method (Flow, pump, gas lift Casing Pressure Water-Bbls.	
	GAS WELL Actual Fred, Teol-MCF/D Teoling Mothed (picol, back pr.)	Length of Test Tubing Pressure (Shui-iu)	Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensate Choke Size
·/I.	CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of any knowledge and belief. Carry Q. Monune (Signature) Engineer (Title) June 11, 1986 (Dute)		OIL CONSERVATION COMMISSION APPROVED <u>IN 1 3 1986</u> , 19 BY <u>Eddie W. Seay</u> TITLE <u>Oil & Gas Inspector</u>	
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly diffic for deepend 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 allow- which on new and accomplated visits. Fill out only Sections I. W. M. and VI for changes of owner, well name or number, or transporter, or other such change of condition.	

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