Submit 5 Copies Appropriate District Office DISTRICT 1	
DISTRICT I P.O. Box 1980, Hobbs, NM	88240

1

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

	State of New Mexico
E	ry, Minerals and Natural Resources Departme

OIL CONSERVATION DIVISION

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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR	AND	AUTHORIZATI

	TO TRAN	ISPORT OI	IL AND NA	TURAL G	AS			
Operator	Well				API No.			
Phillips Petrol	eum Company				30-025-31442			
Address (001 P 1 1 C			7.0					
4001 Penbrook S leason(s) for Filing (Check proper box	Street, Odessa, J	<u>l'exas 79</u>	762	et (Please expla				
iew Well	Change in Tr	ansporter of				• ·		
		ry Gas		App this	roval to t	lare casing it be obtair	head ga	is from
hange in Operator		ondensate		EUR	EAU OF LAI	ND MANAGEI	MENT (B)	n ine M
change of operator give name								
address of previous operator			·				47	67 acres
DESCRIPTION OF WEL		Zost	Tank	K 405	5 - 7	11/92		
tase Name	Well No. Po	ool Name, Includ	ling Formation	tendesum	ter Kind	of Lease	-	ease No.
Luke Federal	2	Livingst	on Kidge	(Delawar	e) XXX	Federal or Fee	MM-	86710
cation D	. 660 -	т	North	660				
Unit Letter	: Fe	et From The		e and	Fe	et From The _	West	Line
Section 31 Towns	ship 21-S Ra	ange 32-	-E M	MPM.	Lea			-
Jacqon or lowit		inge 52	<u> </u>	MPM,				County
. DESIGNATION OF TRA	NSPORTER OF OIL	AND NATU	RAL GAS					
me of Authorized Transporter of Oil	or Condensate			e address to wh	ich approved	copy of this for	m is to be s	ent)
<u>illips Petroleum Co</u>	mpany Trucks	L	4001 P	enbrook S	Street.	Odessa	Texas	79762
me of Authorized Transporter of Cas	inghead Gas [1] ~	Pry Gas	Address (Giv	e address to wh	ich approved	copy of this for	m is to be s	ent)
Paso Natural Compa			P.O. Be	x 1492 -	El Pasc		79999	
well produces oil or liquids, e location of tanks.	Unit Sec. Tw	• • •	Is gas actuall		When	?		
		-S 30E	No					
is production is commingled with the COMPLETION DATA	it from any other lease or pool	I, give comming	ling order num	xer:	·····			
COMILETION DATA	Oil Well		1					
Designate Type of Completion	n - (X)	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v
e Spudded	Date Compl. Ready to Pro	1 xd.	Total Depth			P.B.T.D.		1
. 11-06-91	1-14-92		8585				20	
rations (DF, RKB, RT, GR, etc.)	Name of Producing Forma	Lion	Top Oil/Gas I	' 'ay	· · · · · · · · · · · · · · · · · · ·	8530 Tubing Depth		
91 KB - 3674 GL	Delaware		7080		6106'			
forations			.			Depth Casing	Shoe	
<u>80' - 7096', 7106'-</u>						8585	,	
	TUBING, CA	SING AND	CEMENTIN	IG RECORI)			
HOLE SIZE	CASING & TUBIN	IG SIZE		DEPTH SET		SA	CKS CEM	ENT
17-1/2'	13-3/8"		1	66'		700 sxs	Class	"C" Neat
12-1/4'	8-5/8"			92'				<u>''C'' + Ad</u> d
7 7/01				85'		let stag	e 875	sxs "C"
7-7/8'	5-1/2"		83	0.9				
		F	85			2nd stag	<u>e365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE	ST FOR ALLOWABI			<u></u>	un bla fan skia	<u>2nd stag</u> Tail 370	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after		ad oil and must	be equal to or	exceed top allow	vable for this	<u>2nd stag</u> Tail 370 <i>depth or be fo</i> r	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank 1-13-92	ST FOR ALLOWABI recovery of total volume of lo Date of Test	ad oil and must	be equal to or Producing Me	exceed top allor hod (Flow, pur	vable for this	<u>2nd stag</u> Tail 370 <i>depth or be fo</i> r	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank 1-13-92	ST FOR ALLOWABI	ad oil and must	be equal to or Producing Me	exceed top allow hod (Flow, pur umping	vable for this	<u>2nd stag</u> Tail 370 <i>depth or be fo</i> r	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank <u>1-13-92</u> gth of Test 24	ST FOR ALLOWABI recovery of total volume of la Date of Test 1-18-92	ad oil and must	be equal to or Producing Me Producing Pressur	exceed top allow hod (Flow, pur umping	vable for this	2nd stag Tail 370 depth or be for c.)	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank 1-13-92 gth of Test 24	ST FOR ALLOWABI recovery of total volume of lo Date of Test 1-18-92 Tubing Pressure	ad oil and must	be equal to or Producing Me	exceed top allow hod (Flow, pur umping	vable for this	2nd stag Tail 370 depth or be for c.)	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank 1-13-92 gth of Test 24	Tubing Pressure	ad oil and must	be equal to or Producing Me Producing Pressur Water - Bbls.	exceed top allow hod (Flow, pur umping	vable for this	2nd stag Tail 370 depth or be for c.) Choke Size	<u>e 365</u>	<u>sxs Diac</u> e
TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank 1-13-92 gth of Test 24 aal Prod. During Test	EST FOR ALLOWABI recovery of total volume of la Date of Test 1-18-92 Tubing Pressure 35 Oil - Bbls.	ad oil and must	be equal to or Producing Me Producing Pressur Water - Bbls.	exceed top allow hod (Flow, pur umping e	vable for this	2nd stag Tail 370 depth or be for c.) Choke Size Gas-MCF	<u>e 365</u>	<u>sxs Diac</u> e
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TEST DATA AND REQUE WELL (Test must be after First New Oil Run To Tank 1-13-92 gth of Test 24 ual Prod. During Test S WELL al Prod. Test - MCF/D	EST FOR ALLOWABI recovery of total volume of la Date of Test 1-18-92 Tubing Pressure 35 Oil - Bbls. 54	rad oil and must	be equal to or Producing Me Producing Pressur Water - Bbls. 2	exceed top allor hod (Flow, pur umping e	vable for this up, gas lift, et	2nd stag Tail 370 depth or be for c.) Choke Size Gas- MCF 30	<u>e 365</u> ''C'' s: full 24 hou	<u>sxs Diac</u> e
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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.

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