Submit 5 Copies Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbe, NM 88240

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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 State of New Mexico argy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I										
Operator Phillips Petroleum (Company					. ·	Weil	API No 30-025-	1044600	
Address 4001 Penbrook	Odess	sa, Tex	as 7	9762			··			
Reason(s) for Filing (Check proper box		<u> </u>			Ouh	er : Piease expe	1 <i>u</i> n)			
New Well		Change in	n Transpo	orter of:						
Recompieuon	Oil C		Dry Ga							
change in Operator	Canaghe	ad Gas X	Condet							
id address of previous operator								<u> </u>		
. DESCRIPTION OF WELL case Name	<u>AND LE</u>		Pool N	ame includ	ing Formation		Kind	of Lease		
Sims		4	Blir	nebry .	eri + 4	El	-	() F9(9(1)(1)(or F		lease No.
Jocatios	. 66	50		No	eth	. 66			West	
Unit Letter	·		Feet Fr		La	e and	F	eet From The		Lo
Section 24 Towns	hip 22-5		Range	37-E	, NI	MPM,	Lea			County
I. DESIGNATION OF TRA	NSPORTE	ER OF O	IL AN	D NATU						
ams of Authonzed Transporter of Oil	\equiv	or Conden	sale	X	Address (Giv	e address to wi	uch approved	t copy of this	form is to be s	ent)
Jacques Rece Mar Iame of Authonzed Transporter of Case Phillips 66 Natl Ga		yele	or Dry	Gas 52	Address (Giv	e address 10 wi	uch approved	t com of this	form is to be s	(8)
Phillips 66 Natl Ga	s *	·				Penbrook				~=/
well produces oil or liquids, ve location of tanks.	Unut	Sec.	Т ч р. 1 225	Rge .	is gas actually Yes	y connected?	When	? 0/18/90		
this production is commingled with that	t from any oth	24 her lease or	-	1						,
. COMPLETION DATA			,		-,					
Designate Type of Completion	1 - (X)	Oil Well		as Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Resiv
ute Spudded		pl. Ready to	Prod.		Total Depth		<u> </u>	P.B.T.D.	1	1
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					1	Top Oil/Gas Pay Tubing Depth				
evauons (DF, RKB, RT, GR, etc.)	Name of P	roducing Fo	mation		Top Oil/Gas I	ay		Tubing Dep		
	Name of P	roducing Fo	mation		Top Oil/Gas I	y				
	Name of P	roducing Fo	ormation		Top Oil/Gas I	3 ay		Tubing Dep Depth Casu		
				IG AND	Top Oil/Gas T		D			
	T		CASIN				D	Depth Casu		ENT
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rforalions	T	UBING,	CASIN			NG RECOR	D	Depth Casu	ng Shoe	ENT
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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.

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