

SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator PHILLIPS PETROLEUM COMPANY			
Address Room 711, Phillips Bldg., Odessa, Texas 79761			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:		
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sims	Well No. 6	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee	Lease No. ---
Location Unit Letter <u>M</u> ; <u>370</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>west</u>				
Line of Section <u>24</u> Township <u>22-S</u> Range <u>37-E</u> , NMPM, <u>Leo</u> 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"/> Texas New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) Box 1351, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 24	Twp. 22S	Rge. 37E
Is gas actually connected? yes		When 5-13-74		

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 <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Refracture <input type="checkbox"/>	Stimulate <input type="checkbox"/>
Date Spudded 1-13-68	Date Compl. Ready to Prod. 5-8-74	Total Depth 7625	P.B.T.D. 7260				
Elevations (DF, RKB, RT, GR, etc.) 3321' Gr.	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6263	Tubing Depth 7188				
Perforations Selective 6387-7227			Depth Casing Shoe 7625				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8-5/8"	1137 (460 x Class H w/10% DR & 2% CaO ₂ . Circ 150s	
7-7/8"	4-1/2"	7625 (400 sx TRLW & 650 sx Class H. TOC at 2405	
	2-3/8" tbg	7188	

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)

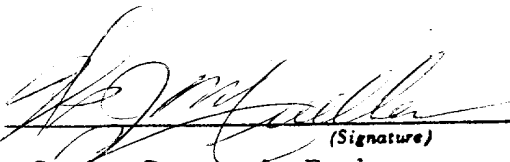
Date First New Oil Run To Tanks 5-13-74	Date of Test 5-28-74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 25	Water-Bbls. 20	Gas-MCF 318

GAS WELL

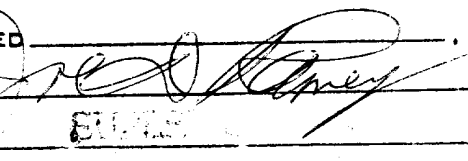
Actual Prod. Test-MCF/D ---	Length of Test ---	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pitot, back pr.) ---	Tubing Pressure (Shut-in) ---	Casing Pressure (Shut-in) ---	Choke Size ---

VI. 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 my knowledge and belief.


W. J. Mueller
(Signature)
Senior Reservoir Engineer
(Title)
5-30-74
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY 
TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened 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 allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

INCLINATION REPORT

Field Name Drinkard County Lea Odessa
Operator Phillips Petroleum Company Address 711 Phillips Bldg. City Texas 79761
Lease Name Sims Well No. 6
Location Unit M 370 feet from the south line and 330 feet from
west line of Section 24, Township 22-S, Range 37-E
This well was drilled in 1968; report is from available data.

<u>Depth (Feet)</u>	<u>Angle of Inclination (Degrees)</u>	<u>Depth (Feet)</u>	<u>Angle of Inclination (Degrees)</u>
375	1/4		
609	1/4		
997	1/4		
1134	1/4		
1433	1/2		
1799	3/4		
2234	1-1/4		
2590	1-1/2		
2808	1-3/4		
3520	1-1/2		
3721	2		
4122	1-1/2		
4492	1-3/4		
4867	1-3/4		
5263	1-1/2		
5480	1-1/4		
6286	1		
6524	3/4		
6994	1/2		
7174	1/4		
7590	1/2		
7625	1/4		

Sworn and Subscribed to before me, this the 8th day of May 19 74.

Dorothy V. Anderson **Dorothy V. Anderson**
Notary Public in and for Ector
County, Texas