

OIL CONSERVATION DIVISION  
P. O. BOX 2086  
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API No. 30-025-27768

OPERATOR	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

Operator Phillips Petroleum Company	
Address Room 401, 4001 Penbrook St., Odessa, Texas 79762	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input 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 \_\_\_\_\_

## I. DESCRIPTION OF WELL AND LEASE

Lease Name Sims	Well No. 8	Pool Name, including Formation Undesignated <i>Warty &amp; Co</i>	Kind of Lease State, Federal or Fee Fee	Lease No. --
Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>north</u> Line and <u>990</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>Lea</u> County				

## II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas New Mexico Pipeline Company	P. O. Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 1384, Jal. New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 24	Twp. 22-S	Rge. 37-E	Is gas actually connected? Yes	When 9-8-82

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

## III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res.	Diff. Res.
Date Spudded 6-2-82	Date Compl. Ready to Prod. 8-28-82	Total Depth 7500'	P.B.T.D. 7483'					
Elevations (DF, RKB, RT, CR, etc.) 3338' KB	Name of Producing Formation Undesignated	Top Oil/Gas Pay 7209'	Tubing Depth 7253'					
Perforations 7306'-7318', 7342'-7366', 7454'-7476'			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	1064	400 sx TLW, 300sx Class					
7-7/8"	5-1/2"	7506	750sx Class H, 1670sx					
			TLW					

IV. 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)

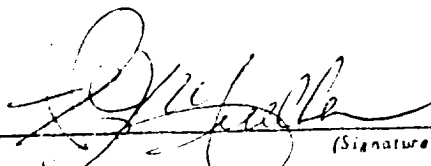
Date First New Oil Run To Tanks 9-2-82	Date of Test 9-8-82	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 500#	Casing Pressure --	Choke Size 16/64
Actual Prod. During Test	Oil-Bbls. 240	Water-Bbls. 24	Gas-MCF 127

## GAS WELL

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

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

  
W. J. Mueller  
(Signature)  
Senior Engineering Specialist  
(Title)

September 10, 1982

(Date)

## OIL CONSERVATION DIVISION

APPROVED SEP 13 1982, 19BY Ellen L. DayTITLE OIL & GAS INSPECTOR

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 multi-

