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NEW MEXICO OIL CONSERVATION COMMISSION
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

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JUN 11 1968

I. Operator
Kennedy Oil Company, Inc.
Address
Box 151 Artesia, N.M.
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain) LEASE and WELL NO. **SI**
Formerly Samedan State #2
Change to State B # 5 for 0-5000' depth
rights Effective June 1, 1968
If change of ownership give name and address of previous owner **Penroc Oil Corporation, Box 1004, Midland, Texas**

II. DESCRIPTION OF WELL AND LEASE

Lease Name State B	Well No. 5	Pool Name, including Formation Grayburg-Jackson (Q.G.SA)	Kind of Lease State, Federal or Fee State	Lease No. B-3627
Location Unit Letter L ; 1650 Feet From The South Line and 330 Feet From The West Line of Section 19 Township 17S Range 31E , NMPM, Eddy 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 Co.	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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Co.	Address (Give address to which approved copy of this form is to be sent) Tulsa, Oklahoma Box 1135, Eunice, n m. 88231			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 19	Twp. 17S	Rge. 31E
Is gas actually connected?		When		
Yes		1961		
If this production is commingled with that from any other lease or pool, give commingling order number: Pen (GR) & Grayburg-Jackson (Q.G.SA)				

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deeper	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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.

R. B. Kennedy
(Signature)

Vice Pres.
(Title)

May 29, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY *R. F. Stamp*
TITLE **Oil and 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 multiply completed wells.