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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED
DEC 29 1972

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

Operator O. C. C. Penrod Oil Corporation	
Address P. O. Drawer 831, Midland, Texas 79701	
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 _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dero-Federal	Well No. 1	Pool Name, Including Formation Winchester-Morrow	Kind of Lease State, Federal or Fee Federal	Lease No.
Location Unit Letter P ; 660 Feet From The South Line and 660 Feet From The East Line of Section 35 Township 19S Range 28E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company	Phillips Building, Bartlesville, Okla. 74003	
If well produces oil or liquids, give location of tanks.	Unit P Sec. 35 Twp. 19S Rgo. 28E	Is gas actually connected? Yes When December 18, 1972

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		X	X					
Date Spudded 4-11-72	Date Compl. Ready to Prod. 6-20-72	Total Depth 11,300'		P.B.T.D. 11,266'				
Elevations (DF, RKB, RT, GR, etc.) 3285 Gr.	Name of Producing Formation Morrow	Top Oil/Gas Pay 10,730'		Tubing Depth 11,065'				
Perforations, 2 jet shots/ft. @ 11,185 - 11,208, 11,033 - 11,088 and 10,769 - 10,819.				Depth Casing Shoe 11,298'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
17-1/4	13-3/8	350		250				
11-3/4	8-5/8	2,965		150				
7-7/8	4-1/2	11,300		300				
	2-3/8	11,065						

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 1,419	Length of Test 24 hours	Bbls. Condensate/MMCF TSTM	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 2050#	Casing Pressure (Shut-in) Pkr.	Choke Size 28/64"

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.

H. B. Fitzgerald
(Signature)
Sec'y-Treasurer
(Title)
December 26, 1972
(Date)

OIL CONSERVATION COMMISSION
APPROVED **DEC 29 1972**, 19_____
BY **W. A. Gussitt**
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.