

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PERMISSION OFFICE	

I. Operator
PENROC OIL CORPORATION

Address
P.O. BOX 5970 HOBBS, NEW MEXICO 88241

Reason(s) for filing (Check proper box)		Other (Please explain)	
<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:		
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil		
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate		

If change of ownership give name and address of previous owner: MOBIL PRODUCING TEXAS AND NEW MEXICO 96100 Hwy Plant Houston Tx

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>PREMIER N. Houston Unit Tr 6</u>	Well No. <u>5</u>	Pool Name, including Formation <u>West Houston Grayburg</u>	Kind of Lease <u>State, Federal or Fee Fed.</u>	Lease No. <u>069641</u>
Location				
Unit Letter <u>480</u>	: <u>990</u> Feet From The <u>5</u> Line and <u>2310</u> Feet From The <u>E</u>			
Line of Section <u>3</u>	Township <u>16 S</u>	Range <u>30 E</u>	NMPM, <u>Eddy</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"/> <u>N/A WATER INJECTION WELL</u>	Address (Give address to which approved copy of this form is to be sent)	
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)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number: Part ID-3 10-23-87

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Phyllis G. Stewart
(Signature)
PRESIDENT
(Title)
10/2/87
(Date)

OIL CONSERVATION DIVISION
APPROVED OCT 19 1987, 19
Original Signed By
BY Ray A. Clements
TITLE Supervisor District M

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 multiple completed wells.

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1st Street, N.W.
Washington, D.C.
10001