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Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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Form C-104 Revised I-1-89	V'(
See Instructions	64
at Bottom of Page	0,

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	BEO.			•	RIFAND	04-2088 AUTHORI	ℸℴ℄ℸ	tr. ∵i			
I.	new					TURAL G		,			
Openior PENROC OIL CORPORATION /								Well API No. 30 015 05864			
Address					20241 507	70		•			
P. O. BOX 5970 Reason(s) for Filing (Check proper box)	но	, add	lew me	X1CO 8	38241-597	ner (Please expl	ais)				
New Well		Change i	а Тталькро	rter of:		not the some ento	<i>~~</i> /				
Recompletion	Oil Casinghe	ad Gas	Dry Ga			Effecti	.ve: J	anuary 1	6, 1992		
If change of operator give name and address of previous operator Te				-	iction In	nc. P. C	. Box	730 Hob	bs, NM 8	8240-252	
II. DESCRIPTION OF WELL Lease Name	AND LE	~~~~	15								
R T WILSON FE	Well No. Pool Name, Inclu EDERAL 1 MASON DE							Gollege Federal or Fi		Lease No. 902300	
Location Unit LetterI		1980		_	Couth			C-06475			
	 				South Lie		<u>60</u> 1	Feet From The	East_	Line	
¥ 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			Range	31E		мрм,			Eddy	County	
III. DESIGNATION OF TRAN	NSPORTE	OF OF O	IL ANI	D NATU							
Texaço Trading & Tran	sportat		1			Box 6062			form is to be se 79711-0		
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Phillips 66 Natural Gas Co.					Address (Giv	e address to wh			form is to be se	n/)	
If well produces oil or liquids, give location of tanks.	Unit	Sec. 24	Twp. 26S	Rge.			Ode Whe	ssa, TX	79762 1/60		
If this production is commingled with that IV. COMPLETION DATA	1 - 1			1							
Designate Type of Completion	~\ <u>\</u>	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Resiv	
Date Spudded	Date Comp	i. Ready to	Prod.	-	Total Depth		Ĺ <u></u>	P.B.T.D.	<u>i</u>	<u> </u>	
Elevations (DF, RKB, RT, GR, stc.)								F.S.1.D.			
	Name of Producing Formation				Top Oil/Gas I	a y		Tubing Depth			
Perforstions					<u> </u>	"		Depth Casin	g Shoe		
	Т	UBING,	CASIN	G AND	CEMENTIN	NG RECORI	<u> </u>				
HOLE SIZE		ING & TU				DEPTH SET		SACKS CEMENT			
											
V. TEST DATA AND REQUES	T FOR A	LLOWA	DIE								
				and must i	be equal to or a	exceed ion allow	unhle for this	e denth or he f	or full 24 hours	•)	
Date First New Oil Run To Tank	Date of Test				Producing Method (Flow, pump, gas lift, etc.)						
Length of Tex	Tubing Press	Rure			Casing Pressur	9		Choke Size			
Actual Prod. During Test	Oil - Bbls.				Waler - Bbls.			Gas- MCF			
GAS WELL			·								
Actual Prod. Test - MCF/D	Length of Te	net.			Bbis. Condensa	IE/MMCF	·	Gravity of Co	on den sale)	
esting Method (pitot, back pr.)	Tubia				/S						
saug manos (paos, ouch pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
I. OPERATOR CERTIFICA				E	^	U 00NG	>= -> / A	TIONE		<u></u>	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above			OIL CONSERVATION DIVISION Date Approved JAN 2 2 1992								
is true and complete to the best of my km		Delief.			Date A	Approved	JAI	z z 199	<u>K</u>		
Simenia Simenia fe	icha-	<u>{</u>							:		
Signature Mohammed Yamin Merchant President				dent	By ORIGINAL SIGNED BY MIKE WILLIAMS TITLE SUPERVISOR, DISTRICT IF						
Printed Name	(505)	-	าเน ะ 596		Title_	SUPERV	ISOR, D	ISTRICT IT	;		
Date		Teleph	one No.								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.