Separate Forms C-104 must be filed for each pool in multi-completed wells.

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

20. 00 (00%) 00	41750	П	
DISTRIBUTION			
SANTA PE			
PILE			
V-8.0.4.			
LAND OFFICE			
THANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

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

Form C-104 riced 10-01-78

REQUEST FOR ALLOWABLE AND

- FROMATION OFFICE	AUTHORIZATION TO TRANSF		N TO TRANSPORT OIL AND NATURAL GAS			
I.		·				
Operator						
Penroc Oil Corpor	ation	· · · · · · · · · · · · · · · · · · ·	······			
Address						
P. O. Box 5970	Hobbs, New Mexico 88241					
Resson(s) for filing (Check proper box)		_	Other (Pleas	e explain)		
Now Well	Change in Transporter of:					
Recompletion	X on	الإ	Dry Gas Effect	cive May 1, 1	988	•
Change in Ownership	Casinghed	od Gas	Condensate		•	
If change of ownership give name and address of previous owner	<u> </u>					
II. DESCRIPTION OF WELL AND	EASE					
Lease Name	1 1	Well No. Pool Name, Including Formation		Kind of Lease	· · · · · · · · · · · · · · · · · · ·	Lease N
Hood Federal	2	Bough Devor	nian	State, Federal or Fee	Federal	NM0450
Unit Letter E : 660	Feet From Th	. West L	ine and 1980	Feet From The	North	
Line of Section 13 Towns	95	Range	35E , NMPA	. Lea		Coun
HI DECICAL TION OF TRANSPOR				•		
III. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	OF Conden		L GAS	to which approved copy	al this form is	(0 he cost)
						-
Amoco Pipeline Name of Authorized Transporter of Casing	head Gas C	or Dry Gas		Suite 500, Ft.		
Matthe of Whitestrad Liquiphoriat or Connid		3. 5.7 dua	Vogiesz lotte aggless	to which approved copy	0) tate jorn ts	to be sent/
	it Sec.	Twp. Rge.	is gas actually connect	ed? When		
If well produces oil or liquids, give location of tanks.	1		No	1		
f this production is commingled with t	net from eny oth	er lesse or pool,	give commingling orde	r number:		
NOTE: Complete Parts IV and V of	n reverse side i	f necessary.				***************************************
VI. CERTIFICATE OF COMPLIANC	E		OIL C	ONSERVATION D	IVISION	
				A A A S Z		
hereby certify that the rules and regulations				MAY 9 198	& .	. 19
een complied with and that the information gi ny knowledge and belief.	ven is true and con	npiete to the pest of	11	Orig. Signed by		
		DT	Paul Kautz			
Mohammed Yan	in Morehan	.	TITLE	Geologist	·	
4.0	iii Merchan		This form in to	be filed in complian		
Sphare Spin Ne	change		11 .	test for allowable for		
(Signature Preside		, ·	well, this form must	be accompanied by well in accordance w	a tabulation o	of the deviat
(Title) All sections of this form must able on new and recompleted well		completed wells.	•	•		
(Date)		Fill out only Sections I, II, III, and VI for changes of owr well name or number, or transporter, or other such change of condit!				

