NO. OF COPIES RECE	6		
DISTRIBUTIO	N		
SANTA FE	A FE		
FILE	1		
U.S.G.5.			
LAND OFFICE			
IRANSPORTER	OIL	/	
THANSPORTER	GAS		
OPERATOR	2)		
PRORATION OFFICE			
Operator			

	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	N Form C	104 des Old C-104 and C-110		
	SANTA FE	REQUEST F		Effective 1-1-65			
ľ	FILE /		AND				
Ī	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NAT	URAL GAS			
ľ	LAND OFFICE						
	TRANSPORTER OIL / GAS /		·				
	OPERATOR 2						
1.	PRORATION OFFICE	PENROC OIL COR					
	Operator						
	P. O. Drawer 831, Midland, Texas 79701  Other (Please explain)						
	Reason(s) for filing (Check proper box)		Other (Lienze ext	tuin,			
	New Well	Change in Transporter of:			,		
	Recompletion	Oil X Dry Gas		& Parth	Linking		
Recompletion Oil X Dry Gas  Change in Ownership Casinghead Gas Condensate Change from Court Lapite							
	If change of ownership give name and address of previous owner				<u> </u>		
11	DESCRIPTION OF WELL AND L	EASE	KI	nd of Lease	Lease No.		
	Lease Name	West Mo.   Poor reduct meraning	india.	nte, Federal or Fee Sta	te B-2071		
	N. G. Phillips-State	6 East Empire	Yates - SR	Sta	<u> 10-4011</u>		
	Location						
	Unit Letter I ; 165	O Feet From The South Line	and990	Feet From The <u>East</u>			
		nahin 17S Range	28E , NMPM,	Eddy	County		
	Line of Section 27 Tow	nship 1/5 Range	2012				
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil   or Condensate  Address (Give address to which approved copy of this form is to be sent)						
		Artesia, New M	exico.				
	Navajo Rfg. Co., Pi	phich approved copy of this	John 13 to be semi)				
	Phillips Petroleum C		Bartlesville,	)kiahoma	79760		
		Unit Sec. Twp. Hge.	Is gas actually connected?	, when	. ,		
	If well produces oil or liquids,  J				04		
IV	If this production is commingled with that from any other lease or pool, give commingling order number: PC-156  COMPLETION DATA  Out well   Gra Well   New Well   Workover   Deepen   Plug Back   Same Res'v.   Diff. Res'v.						
	Designate Type of Completion	on - (X) Oil Well Gas Well	Now well				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D			
	5/20/61	6/18/61	874'	8	66'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	1		
	3649 GR	Seven Rivers	8301	Depth Casing	281		
	Perforations	ALL DESCRIPTION OF THE PARTY OF		865'			
	830' - 840'		The same of the sa		<u> </u>		
			D CEMENTING RECORD	SA	CKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	28			
	811	5-1/2"	866'				
	The state of the s				And the state of t		
	and the same of th			ed land all and must he	un tolor enseed top allow-		
1	. TEST DATA AND REQUEST F	TEST DATA AND REQUEST FOR ALLOWABLE  (Test must be after recovery of total volume of load oil and must be studio exceed top allow able for this depth or be for full 24 hours)  OIL WELL  Producing Method (Flow, pump, gas lift, etc.)					
	Date First New Oil Run To Tanks	Date of Test		Choke Size	NOV 1 2 1969		
	Length of Test	Tubing Pressure	Casing Pressure		D 17		
			Water - Bbls.	Gas - MCF	RTEBIA, OFFICE		
	Actual Prod. During Test Oil-Bbls. Water				- uffice		
	GAS WELL		DNI- Contacto AniCE	Gravity of C	Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Signify of	•		
	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.

(Signature)

(Date)

Production Superintendent (Title)

November 7, 1969

OIL AND GAS INSPECTOR

OIL CONSERVATION COMMISSION

TITLE .

APPROVED

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despened 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.