

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 RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.A.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	<input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PROMOTION OFFICE	<input type="checkbox"/>

I. Operator
PENROC OIL CORPORATION ✓

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

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
TA

If change of ownership give name and address of previous owner
MOBIL PRODUCING TEXAS AND NEW MEXICO 9600 W. 1st St. Ft. Worth, TX

II. DESCRIPTION OF WELL AND LEASE

Lease Name NE SQ LAKE A UNIT	Well No. 18	Pool Name, including Formation SQ LAKE GB-SA NORTH	Kind of Lease State, Federal or Fee Fee	Lease No. 04421
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Location
Unit Letter H : 660 Feet From The E Line and 1980 Feet From The N
Line of Section 9 Township 16 S Range 31 E, NMPM, Eddy 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"/> NAVAJO REFINING CO. PIPELINE DIVISION	Address (Give address to which approved copy of this form is to be sent) DRAWER 159 ARTESIA, NEW MEXICO 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS 66 NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) PHILLIPS BLDG. BARTLESVILLE, OK 74004
If well produces oil or liquids, give location of tanks. Unit C Sec. 10 Twp. 16 Rge. 31	Is gas actually connected? Yes When 9-1-61 Part ID-3

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

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.

Robert J. DeLoach
(Signature)
PRESIDENT
(Title)
10/2/87
(Date)

OIL CONSERVATION DIVISION
OCT 19 1987

APPROVED _____, 19 ____
BY Original Signed By
Let A. Clements
TITLE Supervisor District II

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.