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LAND OFFICE	
TRANSPORTER	OIL 1 GAS
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-
Effective 1-1-65

SEP 7 1977

Operator R. C. Bennett & J. C. Ryan, Joint Operators **O. C. C.**
Address P. O. Box 264, Midland, Texas 79702 **ARTESIA, OFFICE**

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) 400 bbls
To transport condensate from storage tanks during testing Cisco F# 6569-78

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name <u>Penasco Com</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Wildcat</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>L-122</u>
Location Unit <u>J</u> <u>1980</u> Feet From The <u>East</u> Line and <u>1980</u> Feet From The <u>South</u>				
Line of Section <u>31</u> Township <u>18S</u> Range <u>25E</u> , NMPM, <u>Eddy</u> County				

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)
Permian Corporation 1509 W. Wall, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ 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
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If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Resv. Unit, Resv.
Date Spudded <u>7/14/77</u>	Date Compl. Ready to Prod.		Total Depth <u>8973</u>		P.B.T.D. <u>6740</u>		
Elevations (DE, R&B, RT, GR, etc.) <u>3624' GL</u>	Name of Producing Formation <u>Cisco</u>		Top Oil/Gas Pay		Tubing Depth		
Perforations					Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>17 1/2"</u>	<u>13 3/8"</u>	<u>300</u>	<u>300 sx Class C w/2% CaCl</u>
<u>12 1/4"</u>	<u>8 5/8"</u>	<u>1132</u>	<u>450 sx Hal. Lwt/205 sx Class C w/2% CaCl</u>
<u>7 7/8"</u>	<u>4 1/2"</u>	<u>6802</u>	<u>200 sx Class C w/5% CaCl</u>

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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]
(Signature)
Partner
(Title)
September 6, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 8 1977
BY W. A. Gussert
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 100.
If this is a request for allowable for a newly drilled or reopened well, this form must be accompanied by a tabulation of the production 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.