

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
DEC 07 1984
O. C. D. REQUEST FOR ALLOWABLE
AND
ARTESIA OFFICE
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	☒
FILE	☒
U.S.D.B.	
LAND OFFICE	
TRANSPORTER	☒
OIL	☒
GAS	☒
OPERATOR	
PRODUCTION OFFICE	
Operator	

Penroc Oil Corporation

Address
P. O. Drawer 831, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	☐	Change in Transporter of:	
Recompletion	☒	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease
Allied "A" Comm.	1	Undesignated - Bone Spring	State, Federal or Fee State	K-499

Location

Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South

Line of Section 22 Township 20S Range 27E , NMPM, Eddy Cour

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)
Navajo Refining Co.	P. O. Box 159, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co.	4001 Penbrook, Odessa, Texas 79762

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	22	20S	27E	Yes	9-18-75

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. R.
(X)	X					X		X

Date Spudded	Recompletion	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Commenced 11-2-84		12-1-84	11,050'	6727'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3248 GR 3259 KB	Bone Spring	-6503' 6452	6380'

Perforations
6503-6516', 6452-6462, 6606-6626

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17"	13 3/8"	355'	350 Sxs.
11"	8 5/8"	2125'	950 Sxs.
7 7/8"	4 1/2"	10,965'	985 Sxs. - 2 stag
	2 3/8"	6380'	

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 of well 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.)
11-14-84	12-1-84	Flow
Length of Test	Tubing Pressure	Casing Pressure
24 hrs.	80#	0-packer
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
31 bbls	31	0
		Choke Size
		16/64"
		Gas-MCF
		54

Post 11-2-84
12-27-84
Comp. PC

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Larry Brooks
(Signature)
President
(Title)
12/6/84
(Date)

OIL CONSERVATION DIVISION
DEC 17 1984

APPROVED _____, 19____

BY _____ ORIGINAL SIGNED
BY LARRY BROOKS
TITLE _____ GEOLOGIST - NMOC

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

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of conditions.

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