

NEW MEXICO OIL CONSERVATION COMMISSION
**REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-10,
 Supersedes Old C-10a and C-10b
 Effective 1-1-65

PRODUCTION
PROPERTY
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
SEVERALS
REGISTRATION OFFICE

Penrose Production Company
 1665 Commerce Building, Fort Worth, Texas 76102

Reason for filing (check proper box) Other (Please explain)

New Well Change in Transporter of:
 Oil Dry Gas
 Casinghead Gas Condensate

Change in Ownership

Ownership of lease give name Amerada Hess Corporation, Box 591, Midland, Texas 79701
 and name of previous owner

SECTION OF WELL AND LEASE

State "DC" Well No. 2 Pool Name, including Formation Drinkard Kind of Lease State Lease No. 21040

Section E , 2310 Feet From The north Line and 886.4 Feet From The WEST Line

Range 19 Township 21S Range 37E , NMPM, Lea County

SECTION OF TRANSPORTER OF OIL AND NATURAL GAS

Is this a licensed Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipe Line Co. Box 1510, Midland, Texas 79701
 Is this a licensed Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)
Sally Oil Co. Box 1351, Midland, Texas 79701
Penrose Production Company 1665 Commerce Bldg. Fort Worth, Texas 76102

Is well produces oil or liquids, yes is gas actually connected? yes
 and location of tanks. Unit F Sec. 19 Twp. 21S Rge. 37E When 2-22-64

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Operations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

Time 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
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (Flow, 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.

Annalyn Smith
 (Signature)
 Production Records Manager
 (Title)
 November 1, 1972
 (Date)

OIL CONSERVATION COMMISSION
 NOV 13 1972

APPROVED _____, 19____
 BY John Ruyvan
 Geologist
 TITLE _____

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 V for changes of owner, well name or number, or transporter, or other such change of condition.